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DISEASES

OF THE

NERVOUS SYSTEM.

BY

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TO WHICH IS ADDED,

A TREATISE

ON THE

DISEASES OF THE SKIN.

BY

C. E. TOOTHAKER, A. M., M. D.

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## DISEASES

OF THE

# NERVOUS SYSTEM.

It must be conceded that a very great proportion of the diseases incident to mankind, have their seat in the nervous system ;—it is therefore requisite that the general nature of the functions of the nervous system should be well understood, in order to be able to learn accurately the nature of the interruptions to which they are subject from disease.

The mind evidently is connected with the nervous system on the one hand, while the contractile and sensitive parts are connected with it on the other. It may fairly be presumed then, that the inmost powers of the physical system are to be sought for in the nervous centres, and the nerves proceeding from them. It is therefore thought advisable to present a concise view of the anatomy and physiology of the nervous system, as an introduction to a consideration of the diseases incident to it.

The nervous system is divided into two parts, one portion is denominated the *cerebro spinal system*, and the other is termed the *ganglionic system*; and though each possesses many properties common to both, yet each has a distinct office to perform in the animal economy; and to promote this end each has certain peculiarities of structure, and modes of action, corresponding to its range of influence.

Bichat, denominated the cerebro spinal system, “*the nervous system of animal life,*” because it includes all the nervous organs

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Bichat, denominated the cerebro spinal system, “*the nervous system of animal life*,” because it includes all the nervous organs

through which sensation, volition and mental manifestation, the peculiar characteristics of animals, become apparent. This system includes the brain and spinal cord, and all the nerves proceeding from them, together with the several ganglia seated upon these nerves or that form a part of the substance of the brain.

The same author denominated the ganglionic system, the *nervous system of organic life*, because it performs a mediatorial office between the animal and organic functions. This system extends from the cranium to the pelvis, along each side of the vertebral column; it consists of a double chain of ganglia connected by nervous cords, from which nerves with ganglia proceed to the viscera of the thorax, abdomen and pelvis. From the nature of its distribution it will be observed, that it has less immediate connection with the mind either as communicating sensations, or receiving the impulses of the will; and by its peculiar mode of action it will be seen that it has a closer connection with the processes of the organic functions than the cerebro spinal system, and moreover by its peculiar attachments and relations to this system, it would seem to be the channel through which all that is really peculiar to animal life may exert a controlling influence over the processes of organic life, to render them subservient to the animal kingdom.

It is only in the higher orders of animals and in man, that these two systems seem to be so distinct and yet so harmonious in their separate modes of action. The differences between them are not so very essential, since their composition may be said to be the same. Their actions differ in degree, and for different objects,—yet the kind of action as well their mode of action are essentially the same.

In the lower animals all the nervous functions are performed through a single system, corresponding with the cerebro spinal system of the vertebrate animals; and even among this class many of the functions which are controlled in the warm-blooded by the ganglionic nerves, are controlled in the cold-blooded by the pneumogastric cerebral nerves.

In noting the peculiarities of the inorganic and the organic world the fact becomes apparent that the powers and processes that control in the inferior orders of nature become subservient to processes of a higher grade in the higher orders; for example, the physical forces of the mineral kingdom, that under all circumstances and

conditions control the inorganic elements, are no less the property of the vegetable kingdom, but here they become subject to the processes of organic life, which usurp complete control in the vegetable kingdom ; and further, the processes of organic life that control in the vegetable kingdom are assumed and controlled by those which are still higher in the animal kingdom ; for as every thing in the mineral kingdom becomes fashioned into the image and likeness of the vegetable, so every thing in the vegetable becomes fashioned into the image and likeness of the animal. It is by the superinduction of the nervous system in animals and in man that all the processes carried on in the inferior kingdoms of nature, become subservient to the controlling influences of animal life. A system therefore so important, and one that particularly characterizes the elevated position of man in the order of creation, demands the most careful consideration, and the following order may be observed in the investigation of the structure and functions of the nervous system.

1st. *Elementary structure of the nervous system.* The two nervous systems are made up of *nervous centres* and *nerves*. There are two kinds of structure entering into their composition, *vesicular* and *fibrous* ; both of these structures are regarded absolutely essential in the formation of the simplest nervous system.

In the nervous centres the vesicular and nervous matter are mingled together in masses, and wherever these two kinds of matters are found, and the vesicular matter is mingled with the fibrous, it may be inferred that the generation of nervous force takes place and it must be regarded a nervous centre. The mingling of the vesicular matter with the fibrous in masses is found in the brain, spinal cord, and the several ganglia; these therefore are the nervous centres of the nervous system. Nervous force being generated in the nervous centres, requires as a matter of course, appropriate channels to convey it to the periphery of the animal body, and these channels are the *nerves*, which are constructed entirely of the fibrous nervous matter, and distributed in the several parts of the body, for the purpose of conveying nervous force to them, or of transmitting to the nervous centres the impressions made by stimuli. Impressions or conditions are simply conducted along the nerve fibres ; they may be made to deviate from a direct course in the nervous centres, and be reflected, diffused or otherwise disposed of. The

particular structure of nerves is of minute fibres or tubuli filled with nervous matter arranged in bundles of parallel or interlacing fibres; and these bundles are connected by intervening fibro cellular tissue in which the blood-vessels of the nerves ramify; a layer of the same tissue also surrounds the whole nerve, and constitutes its *neurolemma* or sheath.

There are two kinds of nerve fibres observed mingling in most nerves throughout the body. One kind is the most numerous in the nerves of the cerebro spinal system, and the other the most numerous in the sympathetic system.

The fibres of the nerves of the cerebro spinal system consist of tubules of simple membrane, remarkably pelucid, within which is contained the proper nerve substance, a transparent oil-like material, which gives to each fibre somewhat the appearance of a perfectly transparent glass tube filled with a fluid of a corresponding character. This is the appearance of the recently fresh fibres, but after a little time elapses after death, these same fibres change their appearance so as to render it quite evident that their contents are composed of two different materials, the internal or central part occupying what is termed the axis of the tubes, becomes grayish, while the outer or cortical portion becomes opaque and grumous, as if from a kind of coagulation; at the same time the transparent cylindrical tube is exchanged for an opaque double contour, the outer of which being formed by the sheath of the fibre and the inner by the margin of curdled medullary substance. Little masses of granular material soon begin to collect, which distend some portions of the tube, and cause others to colapse, so as to impart a bended appearance to the structure instead of their former cylindrical form.

By reason of the marked difference produced upon the contents of the nerve fibre when exposed to the same conditions, the opinion has been entertained, that the central and circumferential portions of each nerve fibre differ in their essential characteristics.—The central portion has on this account been named by some the *axis cylinder*, and by others the *primitive band*. The outer portion is usually described under the name of the *white substance* of Schwann, which gives to the cerebro spinal nerves, their peculiar white aspect. When the nerve tubules are pressed, their contents readily pass from one portion of the tubular sheath to another, being extremely soft. The size of nerve fibres varies from  $\frac{1}{1400}$  to  $\frac{1}{2000}$  of an inch in

diameter, the smallest being found in the fibrous matter of the brain and spinal cord.

The *fibres of the second kind*, are found abundantly in the trunks and branches of the ganglionic nerves, and they mingle somewhat with the other fibres in the cerebro spinal nerves.—They differ from the fibres of the first kind : 1st, in being only about  $\frac{1}{2}$  or  $\frac{1}{3}$  the size. 2. They have not the double contour, as have the first and fourth, their contents are apparently uniform. 3d. They wear a yellowish-gray aspect, instead of the peculiar white aspect of the cerebro spinal nerves. These characteristics render it probable that they differ from the other nerve fibres in not having the outer layer of white or medullary nerve substance, their contents are seemingly composed throughout of the substance corresponding with the axis-cylinder, or primitive band of the larger fibres.

There appears to be a third kind of fibre intermediate between the two above described, having somewhat the peculiarities of both—which perhaps may be sufficiently indicative that the two kinds of nervous fibre may not be so essentially different as to lead to the supposition that a material difference, either in their office or mode of action, must inevitably be maintained.

Every nerve fibre proceeds uninterruptedly from its centre or origin, to its destination, without branching, anastomosing or forming any direct union whatever with the substance of any other fibres, and it matters not whether its destination be at the periphery of the body, another nervous centre, or the same centre of its origin.

Bundles of fibres may lie in apposition with each other and run together in the nerves but they never unite, where the bundles appear to anastomose there is no union of fibres, but only an interchange of fibres between the fascicula or bundles. It will therefore appear that the central extremity of each fibre is connected with the peripheral extremity of a single nervous fibre only, and this extremity is in direct relation to only one point in its nervous centre, whether this point be in the brain, spinal cord, or other nervous centre. It is therefore plain, that all the nerves distributed to the periphery of the body, are represented by corresponding parts of the large nervous centre; that each nerve is represented by its corresponding centre, and that each of the millions of primitive fibres which are distributed to the peripheral points of the body, is represented by a corresponding point in either the one or the other of

the nervous centres, each nerve may proceed from its ganglion and each fibre from its vesicle—thus presenting the sublime view of a centre within a centre, corresponding, 1st, to all the nerves, and 2d, to each separate nerve, and 3d, to each separate fibre of which the nerves are composed.

The nerves at certain parts of their course, form what is termed *plexuses*, in which they anastomose with each other and exchange fasciculi; the object of such interchange of fibres is apparently to give to each nerve passing off from the plexus, a more extensive connection with the spinal cord, as this would evidently be the case, by communicating with other nerves. The most familiar examples of the communication of nerves in forming of plexuses, are found in the brachial and lumbar plexuses. The brachial is formed by the intermingling of fasciculi from the last four of the cervical nerves, and the first dorsal. It will be perceived from this intermingling, that the parts supplied with the brachial plexus become more extensively related to the nervous centres and more extensive sympathies.

The nerve fibres have a *central termination* in the nervous centres, and a *peripheral termination* in the parts which they supply.

The nerve fibres are said to form a delicate *terminal plexus* as they approach their final and minutest distribution in the several tissues, in small nerves or bundles, which divide, break up, and give off the primitive fibres to be disposed of in various ways, in different tissues. It is difficult to describe the manner in which they terminate, several different modes have been noted, as follows:—

1. They terminate in *loops*, each fibre after issuing from a branch in a terminal flexus, runs over the elementary structures of the containing tissue, then turns back and joins the same or a neighbouring branch in which it proceeds back again to the nervous centre; examples of this arrangement are found in the internal ear, papillæ of the tongue, papillæ of the skin, and some other tissues.
2. They terminate in *plexuses* in certain serous membranes, as in the arachnoid of the brain and spinal cord, and other serous membranes.
3. They terminate by *free ends*, as in the *retina* and in the Pacchionian corpuscles of the skin, (for a description of which see Todd & Bowman's *Physiology*.)
4. They terminate according to Wagner, by the large nerve fibres

## DISEASES OF THE NERVOUS SYSTEM.

suddenly breaking up into numerous branches, anastomosing and forming a net-work, giving off branches which seem to become lost in the substance of the tissue in which they are distributed.

The above constitute the chief modes of the peripheral termination of the nerve fibres; but their *central termination* is in vesicles in the nervous centres, as before stated. These *vesicles* or *nerve corpuscles* have a variety of shapes, and are described as the *simple stellate* or *caudate*, &c. The function of the *nerve fibres* is simply to convey or conduct nervous impressions, and this is of a two-fold character. 1st. Any impression made upon their peripheral extremities, or any part of their course, they convey to the nervous centres; and it is for this reason, that the mind through the brain is able to take cognizance of external objects. 2dly. They serve to convey impressions from the brain and other nervous centres to the parts where the nerves are distributed.

These impressions appear to be of at least two kinds; such as excite muscular contractions, and such as influence the organic functions, secretion, nutrition, &c.

To fulfil the two-fold office of nerve fibres, two distinct sets of them are provided in both the cerebro spinal and ganglionic systems; and in general terms they are called *afferent* and *efferent*.

The *afferent* are those which conduct impressions from the periphery to the centre. In the cerebro spinal system, they are termed *sensitive*. The *efferent* are employed to transmit central impulses to the muscles, and are termed *motor*, as belonging to the *nerves of motion*; both of these offices of the nerve fibres, appear to exercise influence in functions of secretion and nutrition.

Nerve fibres appear to possess no power of originating impulses to action, or of generating nervous force; they require to be stimulated in order to enable them to manifest their peculiar endowments. The property which the fibres actually possess is that of conducting impressions; this property has been named *excitability*, but it always requires the application of some stimulus to produce this property. Those nerves which convey sensations to the brain, are stimulated by external objects acting on their extremities; and those connected with locomotion or motion, are acted upon by the will, or by some force generated in the nervous centres. Almost every thing that interrupts the pressiveness of the nerves, may in some sense be regarded a stimulus. But it is to be observed that a stimulus

applied to the motor fibres will produce motion, but if the same stimulus be applied to the nerves of sensation, or rather to the fibres of the sensitive nerves, sensation will be produced. It is not necessary to enumerate the various stimuli that will give rise to excitability, in general terms it may be said to be mechanical irritation, chemical stimuli, electricity, magnetism, &c.

*Nerve force* moves with inconceivable velocity along the nerve fibre ; in a moment, in the twinkling of an eye, a single mandate of the will controls all the motive fibres of the body, and any impression from any source whatever made upon the peripheral extremities of the nerves of sensation, is as rapidly conveyed to the nervous centres.

Mechanical irritation so violent as to injure the texture of nerve fibres may prove an obstruction to nerve force, so that a stimulus applied to the nerve more distant from the nervous centre than the injured spot, will fail of producing sensation ; and any injury done to the fibres of the motor nerves operates as an obstruction, to the mandates of the will, in producing muscular contraction, more distant from the nervous centre than the point of injury.

It must be observed also, that no nerve fibre can convey more than one kind of impression ; a motor fibre can only convey motor impulses, or such as contribute to motion in contractile parts, and a sensitive fibre can only convey such an impression as may produce sensation if propagated to the brain. The fibres of the nerves of the special senses can only convey their peculiar sensations ; as, the optic that of light, and the auditory that of sound. Neither the rays of the former, nor the sonorous vibrations of the latter, can influence the nerves of common sensation, but other stimuli which may be productive of pain when applied to the nerves of special sense, may produce morbid sensations of light, or sound, or taste, according to the nerve on which the impression is made. This fact is important in a pathological point of view, as a correct interpretation thereof may often aid in forming a more accurate idea of diseased action.

Impressions conveying sensations may be made upon any point of a nerve ; thus when parts are deprived of sensibility by compression or division of the nerve supplying them, irritation of the portion connected with the brain still excites sensation as sensibly

as if connected with the peripheral portion. This accounts for the violent pain sometimes experienced from a paralyzed limb, when the limb itself is totally insensible of any impression; the sound part of the trunk of the nerve in connection with the brain being irritated, while that portion distributed to the limb is void of any sense or feeling. When a nerve is divided, there is no possibility of any impression made upon its cutaneous extremity being conveyed to the brain, but the same sensations which were before produced by external impressions may result from internal causes. This accounts for the fact that when a part of a limb is amputated, the remaining part of the nerves which were distributed to it, gives rise to sensations, which the mind refers to the lost portion; as for instance, when the stump and divided nerves become inflamed, the patient complains of pain as if felt in the part removed. When the stump is healed, after a hand or foot has been amputated, the sensations commonly felt when these limbs are sound, even to the extremities of the fingers and toes, are still felt.

There are many interesting facts illustrative of the peculiar characteristics of the nerves which might be cited in addition to the above, but our object being to consider the general physiology of the nervous system with reference to diseases incident to the same, we will pass to a consideration of the *function of the nervous centres*.

As before remarked, every nerve and every fibre terminates in a centre. All parts of the nervous system which contain ganglion corpuscles, or vesicular nerve substance—the brain, spinal cord, and the several ganglia which belong to the cerebro-spinal and ganglionic systems, the term *nervous centre* is applied.

Each of the nervous centres has a distinct function to perform in the body, that bears a direct proportion to the number of nerve fibres that connect it with the various organs, and with the other nervous centres; but there are general properties common to all nervous centres.

All nervous power or force is believed to be generated in the nervous centres, whether it be the impulse by which the muscles are excited to action, or the force that maintains and controls the organic functions; but this is only true in a dependent or qualified sense, for the brain does not issue any impulse only when it is impressed by the will or stimulated by impressions from without.

Neither do the other nervous centres impart any power only as it is called out by previous impressions. For example: the ganglia connected with the organic functions do not give out the nervous force necessary to the contractions of the intestines, only as stimulated by substances already in the intestinal canal.

It is the specific office of the nervous centres throughout the body, unquestionably, to variously dispose of or to transfer the impressions that reach them through their many centripetal nerve fibres. All impressions are conveyed to the centres along the simple course of the fibre and communicated, but they are *perceived* only in the brain.

To illustrate more fully what is understood by *conduction in or through nervous centres*, the following example may be cited: food taken into the stomach acts as a stimulant, producing a certain impression on the nerves in the mucous membrane of the organ; this impression is conveyed through them to the adjacent ganglia of the sympathetic system; ordinarily, this would call forth a force from the ganglia that would result in a movement of the muscular coat of the stomach and the adjacent parts; but if the food should contain any thing detrimental to the interests of the economy, a sharper irritation than the food is capable of imparting may be conducted through the nearest ganglia to others more remote and more distant, causing an influence to be sent back upon the organic functions that either paralyzes their efforts or enhances their activity to a degree that draws forcibly upon the vitality of the system. Irritation may be conducted through all the sympathetic ganglia, and farther to the ganglia of the spinal nerves, and through them to the spinal cord, whence may react that kind of motor impulses sometimes witnessed in the abdominal and other muscles, producing cramp. From the spinal cord, the same impression may be sent to the brain, and to the mind itself in a reverse direction. The mind may act on the brain, and send its influence from them to the cord, the ganglia of the spinal nerves, sympathetic ganglia, and back so far as to exert its influence upon the stomach and neighboring parts.

The nervous system in man, composed as it is of nervous centres and nerves, is so connected in all its parts as to produce the most intimate relation between the motive and sensitive fibres. The sympathetic system when in health may receive normal impressions without a palpable conveyance of them to the sensorium, as may the

normal operations of the sensorium take place without producing any perceptible modification of the organic functions; but any unnatural impression made upon either may sensibly affect the other.

Impressions may be *transferred*, *diffused* or *reflected*; as for instance, an *impression* made upon the nerves of the hip-joint, may be conveyed to the spinal cord, and from thence to the central ends of the nerve fibres of the knee-joint, and through these the transferred impression is conducted to the brain. This accounts for the mind taking cognizance of the disease as existing in the knee instead of the hip. Sometimes, however, the primary impression is conveyed from the hip, and then the pain is felt in both the hip and the knee. An impression is said to be *diffused*, when it is received at a nervous centre, and diffused to other fibres in the same centre, produces sensations over an indefinite area; hence result various kinds of impressions, denominated *sympathetic*. Sometimes such sensations are referred to every part of the body. *Reflected impressions* are such as are communicated from sensitive to motor fibres; as for instance, light falling on the retina contracts the iris; and more extensively, when an irritation in the larynx conveyed to the sensorium brings all the muscles engaged in expiration into coincident action.

In order to apprehend more conclusively the nature of diseases pertaining to the nervous system, a more thorough acquaintance with the nature of these various kinds of impressing is requisite, and the reader is recommended to works on the nervous system, that he may become as familiar as possible with its physiology; our space will only permit an outline view.

The specific functions of various portions of the nervous system commend themselves for careful consideration.

The cerebro-spinal nervous system includes the brain, medulla oblongata, the spinal cord, the nerves going from them; and the functions in general of these several portions must be well understood in order to note with any degree of accuracy an interruption of them. From what has been stated, it will be perceived that the nervous system is not only the essential instrument of vital association but of vital endowment, and therefore present in every part of the body. The nerves may be divided into three classes, as follows:

*First.*—The cerebral, or the sentient and voluntary.

*Secondly.*—The true spinal, or excito-motor.

*Thirdly.*—The ganglionic, or the nutrient and secretory.

Without pursuing the physiology of the nervous system farther, as preliminary to the consideration of the diseases incident to it, we will remark, that it will be necessary to have frequent reference to the physiology of the parts where disease is manifest. We will first consider the characteristics of the various diseases incident to the nervous centres.

#### DISEASES OF THE NERVOUS CENTRES.

The nervous centres of the cerebro-spinal system are each protected with coverings or meninges, which often become the seat of disease ; these will be duly considered in the following pages. The nervous centres often become the seat of congestion, which may be considered in the following order : 1st, congestion, or hyperæmia of the cerebrum ; 2d, of the cerebellum ; and 3d, of the medulla spinalis.

##### *Congestion, or Hyperæmia of the Cerebrum.*

By congestion is understood an accumulation of blood in the vessels of some portion of the centre, and when it occurs in the cerebrum the following symptoms are apparent : when slight, there is merely pain in the head, vertigo, confusion and disposition to sleep ; the intellectual faculties may not be disturbed, sensibility and the power of motion may remain unimpaired ; at other times, there may be retarded movements, or the reverse, an incessant desire to be moving, and sometimes, though seldom, accelerated movements, may result. Formication is sometimes felt on one or both sides of the face, and in the limbs.

The *pulse* is full and strong, very tense and vibratory ; the temporal and carotid arteries beat violently, although the pulsations of the heart may betray nothing abnormal.

The *face* generally becomes red ; the *eyes* injected ; and sometimes *epistaxis* succeeds these indications.

Sometimes fever attends these symptoms, and at other times they are unattended by any febrile excitement.

The hyperæmia may continue for a short or longer period, recurring frequently, and sometimes at regular seasons, as for example,

every evening; or at more distant intervals, as spring and autumn. When it is extensive, the patient sustains a sudden loss of consciousness, and falls down as if deprived of life. He may remain in this condition for a length of time, deprived in a great measure of sensation, volition and mental manifestation. Death may take place in a very short time, or restoration may speedily ensue; some slight impairment of the intellect may be apparent for a short time, the speech may be somewhat affected, and not unfrequently the sight or hearing becomes temporarily impaired. This disease having been described frequently as *a form of apoplexy, determination of blood to the head, &c.*, may be distinguished from that which is termed hemiplegia, on the account of there being only an ephemeral debility, either general or partial, and not permanent paralysis, as is the case when there is an arterial, cerebral haemorrhage. Paralysis of the entire side of the body may take place from hyperæmia of the cerebrum, but it differs from that which takes place from haemorrhage in the cerebrum in being of short duration only. There are, however, some exceptions to this rule, as cases of permanent paralysis have occurred from a mere congestion of the blood vessels of the cerebrum, without the slightest traces of there being any evidence of haemorrhage. This form is generally attended with convulsions and ephemeral paralysis of important organs, as the tongue.

Sometimes persons are attacked several times a day with *rush of blood to the head*, impairing for a short period the functions of sensibility and locomotion, and sometimes the difficulty may be indicated only by intellectual disturbance, with scarcely any impairment of sensibility or mobility. In this case the delirium is intense, and the patient may exhibit immense muscular power. Death, for the want of nervous supply to the respiratory apparatus, sometimes takes place suddenly, when this symptom supervenes, the face appearing florid and swollen, and at times livid and black.

CAUSES.—The causes of hyperæmia or cerebral congestion are various: sudden changes from the extremes of temperature, or exposure to a very cold atmosphere, may be recorded among the prominent causes; anything that produces irregularity of action of the blood vessels of the brain, may produce hyperæmia in that viscus, and anything that interrupts the general circulation may also occasion the difficulty. Copious blood-letting, and other

debilitating losses such as are brought about through haemorrhages, may also be recorded among the causes that impede the circulation, and result in cerebral congestion. Over doses of opium, alcohol, belladonna, and other narcotics, may also be recorded among the causes.

**TREATMENT.**—The remedies the most suitable for cerebral congestion are, Aconite, Arnica, Belladonna, Bryonia, Chamomilla, China, Ferrum, Graphites, Ipecac., Mercurius, Nux vom., Opium, Pulsatilla, Sepia, Sulphur, Veratrum, and Zincum.

When the determination of blood to the head is accompanied by a full, bounding pulse, flushed face, or the patient complains of fulness and oppressive weight in the forehead, with sensation as though all the contents of the skull would gush through the forehead, or when there is heat in the forehead and redness of the face, *Aconite*.

When there is rush of blood to the head, with burning heat in the head, the body being cool or not usually warm, *Arnica*.

When there is cerebral congestion, with internal and external heat of the head, with distension and throbbing of the cerebral arteries, attended with loss of consciousness, *Belladonna*.

When in bilious temperaments there is great fulness of the head, with pressure in the direction of the forehead, or pressure from within outwards or the reverse, attended with drowsiness in the day time and slight wandering, and when the symptoms attending the hyperæmia become aggravated by motion, *Bryonia*.

When there is rush of blood to the head, with beating in the brain, attended with inquietude, moaning and tossing, and particularly when the patient has complained previously of semi-lateral drawing and tearing in the head, *Chamomilla*.

Rush of blood to the head, with heat and fulness in the head, in exhausted persons, or in those who have sustained severe losses, *China*.

In persons of feeble constitution, who are subject to alternate constipation and diarrhoea, with headache and painful pressure when in the open air, periodical throbbing headache when attacked with hyperæmia of the cerebrum, *Ferrum*.

When there is mere headache, vertigo, confusion, and a tendency to sleep, without loss of sensibility and the power of motion, and

also a humming in the ears and perspiration about the head, *Graphites*.

In cases where the hyperæmia is succeeded by vomiting and aversion to every kind of food, bitter taste in the mouth, pressure in the head, or headache of the most violent character, and vomiting at the same time, with violent distress in the stomach, *Ipecacuanha*.

In bilious temperaments somewhat subject to arthritis or gout, where the subject is prone to nocturnal fevers or disposition to perspire, vertigo in the evening, and headache as if it would fly to pieces, with fulness or hyperæmia of the cerebrum, *Mercurius*.

When there is an increased desire to be moving about, and formication on one or both sides of the limbs and face, irascible and irritable, or very drowsy, severe headache after eating, and rush of blood to the head, with humming in the ears, *Nux vomica*.

When there is felt a heaviness of the head, and stupefaction or headache, aggravated by moving the eyes, or congestion of blood to the head, attended with drowsiness and violent throbbing, *Opium*.

In females subject to painful menstruation and frequent attacks of hyperæmia, *Pulsatilla*, *Sepia*. These remedies are also well suited to alleviate rush of blood to the head in feeble constitutions and mild dispositions of either sex. When the subjects are of a psoric habit, or possess any hereditary taint, *Sulphur* may precede the use of either.

Bubbling or throbbing headache, caused by rush of blood to the head, especially early in the morning, *Sulphur*.

When rush of blood to the head has been caused by fright, and the head feels as though it would burst, *Veratrum*, and also *Aconite* and *Chamomilla*.

Hyperæmia in scarlatina, *Zincum*.

Aside from the remedies named above, the following may be considered:

When there is headache when sitting, as if there is fulness of the blood-vessels and throbbing in the vertex, and twitching on the forehead and temples, itching in the eyes or vertigo as from intoxication, *Agaricus muscarius*.

For headache in the forehead from staying in a close room, with feeling of weight when turning the eyes, *Agnus castus*.

Rush of blood to the head, affecting the eyes and nose, and head-

ache as if the hairs were pulled out, pressure in the forehead and bleeding at the nose, augmented during a walk in the open air, *Alumina*; also, when the rush of blood is preceded or followed by weak memory and inability to think, *Alumina*; attended with nausea, drowsiness in the day time, vertigo and painful pressure and humming, as if the contents of the skull would issue through the forehead, or as if the head would split, burning in the eyes, *Ammonium c.*

When rush of blood occasions headache deep in the brain, with sensation as if the head were larger, *Bovista*.

Congestion of the blood to the head, attended with icy coldness in and about the head, tendency to start, obstinate, despairing mood, chilly internally, *Calcarea carb.*

Rush of blood to the head with throbbing in the head, red and hot cheeks, and headache as if a stone were lying on the head, *Cannabis*.

Rush of blood to the head with humming in the ears, and hard of hearing, the occiput feels enlarged, *Dulcamara*.

Painful rush of blood to the head when first commencing to move, *Fluoric acid*; when brought on by mental emotion, *Ignatia*; when brought on by stooping, *Lachesis*; with intense heat in the head, *Nitric acid*; when attended with shocks in the head, *Spi-gelia*; when there is stupifying pressure of the whole brain, *Ruta graveolens*.

The general function of the cerebral hemispheres being intimately related to the mind, one of the main evidences of their being implicated is the greater or less impairment of the mental manifestation, such as dulness, stupor, loss of mind and memory, delirium, &c. Nearly all cases of hyperæmia will be likely to be indicated to a greater or less degree by some of these phenomena. It is well known that any severe injury to the cerebrum, or sudden pressure by severe rush of blood to the head, may instantly deprive a man of all power of mental manifestation, and that congenital deficiency of the cerebral hemispheres is attended with corresponding feebleness of the intellectual powers.

**GENERAL TREATMENT.**—During an attack of hyperæmia of the cerebrum, whether the patient is severely afflicted or not, it is better for him to lie with his head low, and if subject to frequent attacks to subsist upon a moderate diet easy of digestion.

*Congestion, or Hyperæmia of the Cerebellum.*

THE cerebellum is a segment of the encephalon about which there has been entertained different views. In the opinion of the phrenologists, it is the seat of sexual love, and were this the exclusive function of the organ it would be easy to detect any local difficulty appertaining thereto. But other physiologists from a variety of experiments, have come to adverse conclusions.—

*Flourens*, experimented in such a way, as to lead him to regard the function of the cerebellum to be the co-ordinator of muscular movements; in removing the cerebellum of birds by successive layers, he found on removing the most superficial, that feebleness & want of harmony of the movements were the consequence. When he reached the middle layers the animals became restless without being convulsed, their movements were violent and irregular, but their sight and hearing were perfect. By the time the last portions of the organ were removed, the animals had entirely lost the power of springing, flying, walking, standing and preserving their equilibrium. When an animal in this state was laid upon its back, it could not recover its former posture, but it fluttered its wings and did not lie in a state of stupor; it saw the blow, which threatened it and endeavored to avoid it; volition, sensation, and memory, therefore were not lost, but merely the faculty of combining the actions of the muscles, and the endeavors of the animal to maintain its balance were like those of a drunken man. Similar results were obtained by a repetition of the experiments on different classes of animals, From which *Flourens* inferred that the cerebellum belongs neither to the sensitive nor to the intellectual apparatus, and that it is not the source of voluntary movements, although it belongs to the motor apparatus; but it is the organ for the co-ordination of the voluntary movements, or for the excitement of the combined action of the muscles; comparative anatomy confirms this view, inasmuch as in each of the four classes of vertebrata, the species where natural movements require most frequent and exact combinations of muscular actions are those whose cerebella are most developed in proportion to the spinal cord. On the account of the strength of the evidences the view of *Flourens* has been generally adopted. But another hypothesis is started by *Foville* that the cerebellum was the seat

of the muscular sense, that is, of the sensation derived from muscles, through which the mind acquires that knowledge of their actual state and position which is essential to the exercise of the will upon them. This hypothesis will explain the facts elicited by Flourens, perhaps, quite as well as his own inference. But in the absence of perfect physiological knowledge we deem it proper to make use of uncontroverted facts, as far as developed. From the foregoing it might be supposed that complete *Congestion* or *hyperæmia* of the blood-vessels of the cerebellum would destroy the combination of muscular movements, not destroying the power of the muscles, but occasioning the loss of the power of the will in properly adjusting and controlling them. As the development of the cerebellum is evidently associated with the strength of the muscular system or rather the combined action of the muscles, a partial congestion might be attended with a want of harmonious movement, which difficulty would be increased, as the congestion became more general. We have met with the following cases, which perhaps may serve as a partial delineation of the symptoms that might arise from congestion of the blood-vessels of the cerebellum.

*Case I.*—A female of bilious temperament, in full possession of consciousness complained of a sensible fulness at the base of the brain without any definable pain; when she attempted to move her head, she would complain of its going in a direction which she did not contemplate; she manifested a disposition to put forward her chin and throw her head back involuntarily; when she attempted to walk she could exercise the muscles of the lower extremities without being able to control their direction. In attempting to put her hand to the head, she would move it without control in various ways; in short she appeared to know what movements she desired, but could not co-ordinate her muscular movements, so as to effect what she desired. There was also a convulsive twitching of the chin towards the left shoulder. It may be remarked that this lady had previously suffered from attacks of rush of blood to the head, causing her at times, to remain insensible for hours. She had been subject to severe mental disturbance, her pulse was full but not tense, her digestion appeared to be undisturbed, and the usual secretions appeared to be normal. She had been in this condition for some weeks previous to the time I saw her, and at times I learned her respiration had been labored and difficult. Although the symptoms

were the only guide for the treatment, I could not avoid the inference that there was hyperæmia of the blood-vessels of the cerebellum, which perhaps affected sympathetically the contiguous portions of the base of the brain. She had been subject to allopathic treatment on former occasions, and her system had evidently been mercurialized, her *pulse* was somewhat accelerated and evinced a general irritability of the system.

*Treatment.*—The first remedy employed in this case was *Sulphur 18th*, repeated every twenty-four hours for a week, little or no change was produced during the time. *Nux vomica 6th*, was then administered for several days with little marked effect, except that she appeared to shudder as from cold. *Conium 6th*, was next employed, and after two days the patient could articulate more distinctly, but in other respects, there was scarcely any improvement. *Pulsatilla*, *Sepia*, *Belladonna* and *Aconite*, were severally employed with but little effect. The patient appeared to emaciate, and slight febrile symptoms, and night sweats set in. *Graphites 30th*, was employed for four or five days, three globules daily without effect, after which, *Stannum 30th* was given, which seemed to produce a marked change in the condition of the patient. The twitching of the chin towards the left shoulder ceased, the night sweats passed away with the fever, the sensation of fulness from beneath the occipital suture also became relieved, and from this time the patient gradually recovered.

*Case II.*—A gentleman about thirty-five years of age an Attorney at Law, of sanguineo-bilious temperament, complained at first of severe pressure and pain, at the base of the back part of the head which was followed by complete loss of power in controlling the movements of the body. When he attempted to walk, his movements would be various, evincing a complete absence of all power to combine the muscular movements necessary in walking. The mental faculties of this gentleman remained unimpaired, there was no perceptible tenderness of the spine, his speech remained perfect, but whether from habit or the effects of the disease, there was a constant inclination to draw up the shoulders, with the head thrown backwards. This man was under the treatment of several of the most eminent allopathic physicians, for several years. He was treated with moxas, setons, and other topical measures, with no effect whatever. His brother being an eminent allopathic physician, was his

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chief medical adviser, and of course debarred him from a trial of homœopathic treatment. This patient became the father of children during his affliction, but he never recovered. This case is cited because it came under the observation of the writer when a student, and also because there are symptoms, which if properly interpreted might indicate a chronic hyperæmia of the cerebellum.

*Case III.*—A gentleman of bilious temperament, aged thirty, a merchant by profession, became afflicted with a severe pain in the occiput, which afterwards ceased, leaving a sensation of weight and fulness in the back part of the head near the neck, and a partial derangement of muscular action in walking, which rendered it necessary for him to have the support of another when he ventured the experiment. When the writer first took charge of this case, he found the patient in full possession of his intellectual faculties, with a good appetite, and normal condition of the digestive organs, and regular daily evacuations, and this had been the case, from the best information that could be obtained from the commencement of his sufferings, a period of thirteen months. He was at first under Allopathic treatment, under which he had to endure a resort to severe topical measures.

*Treatment.*—Sulphur was the first Homœopathic remedy given in this case, followed by *Phosphorus*, each in the sixth dilution, under this treatment, he appeared to rally for awhile, and there seemed to be some promise of complete recovery, but after awhile he relapsed into his former state. *Graphites 3d*, was given without effect. *Conium 6th* appeared to be of service for a while, as also did *Belladonna* and *Bryonia*, but soon after an apparent improvement from the use of any remedy he would soon relapse. His friends perceiving that no permanent good resulted from Homœopathic treatment after three months, placed him at a *water cure* establishment, where he was faithfully attended to for four months, during which time he lost about forty pounds in weight, with no improvement of his general health, after which he gradually sank away and died. During his whole illness, his sexual instincts remained without being impaired, and his wife bore him a son one year after he was taken sick. There was no post-mortem examination of this case, which is much to be regretted.

*Case IV.*—A man who died, aged about forty; the following facts were elicited from a post mortem examination: complete con-

gestion of the blood-vessels of the cerebellum, partial congestion of the blood-vessels of the cerebrum. For some weeks previous to death, the patient was averse to exercise, reeled and tottered when he attempted to walk, his bowels were so completely torpid that he had no natural evacuations.

The above cases are cited, merely for consideration, because they appear to be illustrative of the effects of hyperæmia of the blood vessels of the cerebellum; but it is by no means certain that this important segment of the encephalon, was the source of all the phenomena detailed. When its physiology is better understood, it is not at all unlikely, that we shall be able to detect with greater accuracy, its implication by disease from the manifest symptoms.

The only indications for treatment of diseases implicating the nervous system, are the symptoms; and it strikes us, that as rush of blood to the cerebrum, if not sufficiently severe to interrupt sensation, is accompanied by severe pain and fulness in the sinciput, so a similar hyperæmia of the cerebellum, may give rise to pain, &c., in the occiput, and in the absence of anything more definite, the following indications for the use of remedies when there is pain in the occiput, may be of service.

When there is dull pain in the occiput, accompanied by general febrile symptoms, full bounding pulse, vertigo when rising from a recumbent posture, with reeling, as if intoxicated, *Aconite*.

If pain is felt in the occiput from concussion, which is sometimes produced by jumping upon the heels when the lower extremities are stiffened from muscular exertion, and not duly flexed, *Arnica*.

In cases where there is aching in the back part of the head, extending to the forehead, with dread of becoming delirious, tearing pains behind the ears, with heat in the head, and tearing, crampy pains, and twitchings and spasms in the muscles, *Ambra grisea*.

Headache in the occiput when making a wrong step, or from a loud noise, accompanied with rigidity in the joints, as if the tendons were too short, or when there is paralytic weakness and languor, *Ammonium muriaticum*.

When there is oppressive pain in the occiput, towards the nape the neck, and a disposition to feel chilly, and nocturnal twitchings of the muscles all over the body, heaviness in the whole body, emanation, especially in scrofulous persons, *Baryta carb.*

In cases where there is rush of blood to the head, especially in

the occiput, with beating in the brain, and worse in bad weather, accompanied with weakness of the joints and coldness, generally in the afternoon, *Borax*. If also accompanied by sensation as if the head were larger, *Bovista*.

Pain in the occiput, extending to the right side of the head, with eructations and inclination to vomit, congestion of blood to the occiput, and heat in the back part of the head, numbness of single parts, and especially in psoric constitutions, *Calc. carb.*

When the head inclines backwards from a crampy pressure in the occiput, and especially if in sensitive persons, the victims of silent grief, and inclined to weep, *Ignatia*.

Aching in the occiput, especially when walking, in a vexed mood, accompanied by stitches in the ears, and humming as if from rushes of blood, *Kali carb.*

Rush of blood to the occiput, with sensation as if the head had grown larger, and heaviness of the head, pain worse in the open air, *Manganum*. Sensation of pressure in the occiput, *Magnesia muriatica*.

Rush of blood to the head, tensive, spasmodic drawing in the head, especially the occiput and nape of the neck, and especially when attended with hypochondriac and hysterical anxiety, with palpitation of the heart, *Moschus*. Heaviness of the head, especially in the occiput, and particularly if the symptoms occur during a paroxysm of intermittent fever, *Natrum muriaticum*.

For fulness of the head, especially in the occiput, with stitches all through the head, or rush of blood to the head, with heat in the back part of the head, *Nitric acid*. This remedy is best suited to syphilitic subjects, when there is a tendency to caries of the bones or rickets.

Rush of blood to the head, with humming in the ears, and heat and pain in the occiput, arising from a sudden cold, *Nux vomica*. Throbbing headache in the occiput, and sensation as if every thing in the head were alive, *Petroleum*. *Sepia*, is especially suitable for females, when suffering from rush of blood to the head, and beating headache, especially in the occiput, with heat in the head, and particularly when stooping. *Spigelia*, is suitable for painfulness of the occiput, with sensations of stiffness as if gone to sleep in the nape of the neck, and when the pressure in the head is worse when stooping, or when there are shocks in the head when walking in the open

air. When the head is drawn backwards, with convulsive motions, *Stramonium*. *Sulphur*, is especially indicated, when there is rush of blood to the head early in the morning, with a feeling of fulness in the head, especially in the occiput. It is particularly indicated, when there is heat in the back part of the head, and drawing and tearing through the head, with a bubbling or throbbing headache, or tingling, roaring, and humming in the head, and heat caused by the rush of blood. There are other remedies, that act directly upon the occipital region, well calculated to relieve anything like congestion of the cerebellum, which is probably attended in its incipient stage, with more or less pain in the occiput.

DIET.—During treatment, should be light but nutritious.

#### *Congestion, or Hyperæmia of the Spinal Cord.*

It is by no means probable, that congestion of the blood-vessels of the spinal cord, ever becomes general, although certain portions may become implicated, and under such circumstances, the organs to which the nerves proceeding from these portions are distributed, become to a greater or less extent implicated.

If congestion occur in the superior or thoracic portion of the cord, the superior portion of the trunk is affected; but if the same occur in the region of the sacrum or lumbar vertebræ, the abdominal portion of the trunk becomes affected.

SYMPOMTS.—Congestion of the blood-vessels of the spinal marrow, if located in the dorsal portion, may give rise to oppressed respiration, dyspnoea, sometimes cough, increased sensibilities of the tissues of the lungs, and increased or diminished sensibility of different parts of the frame; increased or diminished mobility of the upper extremities, and paralysis. If the congestion occurs in the lumbar region, various phenomena occur, with reference to the abdominal organs. There may be paralysis of the bladder, and other organs, constipation as well as pain, in the region affected. The difficulty may terminate spontaneously, after a short or longer duration, or it may become chronic, or end in death.

CAUSES.—Supposed to be the same as affect the organism in producing other congestions.

TREATMENT.—The treatment of hyperæmia of the spinal marrow, is nearly the same as that for other local congestions.

When there is an indication of congestion in the dorsal region, affecting the function of the lungs, and the muscles of the upper extremities, with sensation of heat over the region of the dorsal vertebrae, *Aconite* may be given and repeated several times, and afterwards *Belladonna*, if the *Aconite* fails of affording complete relief.

When there is pain and heat in the back or spine, that has been occasioned by contusion or mechanical injury, affecting the organs of respiration, as above, and there is a full pulse, and the patient complains of feeling sore in the affected region, and particularly if there is anything like paralytic weakness in the thoracic extremity, *Arnica* and *Hypericum* may afford relief.

If the difficulty occurs in females of lymphatic temperament, of mild or sensitive disposition, or if attended with anything like derangement of the menstrual function, *Pulsatilla* has been known to afford relief.

In a case of apparent congestion of the blood-vessels of the lumbar portion of the medulla, which was characterised by pain and heat in the lumbar region, obliging the patient to lie on the back for the sake of ease, and also affecting the abdominal muscles with a paralytic weakness that interrupted all efforts for the evacuation of the bowels or bladder, *Belladonna* afforded relief, and *Nux vomica* completed the cure. The patient was of sanguine temperament, aged about twenty-five years.

In the case of a male, aged forty-two years, of leuco-phlegmatic temperament, where there was pain and heat extending from the sacrum to the inferior dorsal vertebrae, attended with loss of power in the lower extremities and the muscles of the abdomen, *Nux vomica* afforded partial relief, and *Conium* completed the cure.

Attending congestions of different portions of the medulla spinalis, which in most cases, will be denoted by heat and pain in the region, different groups of symptoms may arise, which will require corresponding homœopathic remedies. *Aconite*, *Belladonna*, *Nux vomica*, *Rhus tox.*, *Bryonia*, *Sulphur*, *Calcarea*, and many other remedies will be found serviceable, if otherwise indicated.

When individuals are subject to attacks of hyperæmia of the nervous centres, too much care cannot be exercised to avoid all excitement, and total abstinence from all intoxicating drinks cannot be too strongly recommended. Regular exercise is recommended,

and even enjoined, and also, a moderate diet, with only a small proportion of fluid, in order to avoid repletion of the vessels.

To facilitate the return of blood to the extremities, patients should not be suffered to remain too long in a horizontal position, and during attacks of hyperæmia of the encephalon, it would be as well for the head to be slightly elevated. The extremes of heat and cold should be avoided as much as possible, and too much sleep is to be avoided, as having a pernicious tendency.

As in the employment of remedies, symptoms must be the guide, and as every remedy in all probability, acts directly upon some specific locality, there cannot be too much care exercised, in the study and right interpretation of the symptoms, and the proper affiliation of the remedies.

#### INFLAMMATION OF THE NERVOUS CENTRES.

Although the nervous centres have numerous anatomical divisions, and each performing specific functions, yet the researches of physiologists have not been sufficiently extensive, to enable us from symptoms to locate the precise seat of inflammations, as they take place. In general, we can distinguish inflammation of the encephalon, from that of the medulla spinalis; but it is not always easy to determine between that of the cerebrum, cerebellum, and medulla oblongata, and when we have decided in general terms, that the inflammation is encephalitis or myelitis, there is no means of being positive whether it affects the medullary substance, or the membranes that invest it. In the treatment, therefore, of inflammations of the nervous centres, the symptoms must be the guide.

As the intellectual faculties are supposed to be seated at the periphery of the brain, it has been supposed, that much delirium accompanying other signs of inflammation, indicates that the seat of the inflammation is in the meninges or peripheral portion of the brain.

And on the other hand, somnolency, convulsions, and want of power over the apparatus of voluntary motion, have been regarded as indications of deeper seated inflammation; we will therefore proceed to describe the symptoms of encephalitis.

SYMPTOMS.—The encephalon being the seat of sensation, volition, and mental manifestation, an attack of inflammation will modify these faculties to a greater or less degree, according to severity and extent, as well as in accordance with the seat and character of the inflammation ;—hence, some cases will be characterised by violent delirium, augmented by every impression made upon the sensorium ; the slightest noise may bring on a paroxysm. This, at times, continues throughout the whole duration of the disease, but when it is about terminating fatally, coma takes its place. There is usually sleeplessness and great restlessness. In other cases, patients appear morose, and unwilling to be disturbed. In some cases, the intellect remains unaffected. The earliest symptoms, are violent excruciating pain in the head, increased by light or noise, and at times the skin is unusually sensitive,—the sight and hearing depraved; flashes of light, detonations and singular noises are heard. At a later period, the senses become less acute. Vomiting may mark the onset of the disease ; sometimes the bowels may be deranged ; at other times, the concentration of the forces to the encephalon are so great, that complete constipation is the result.

The presence of encephalitis may also be indicated by disordered motion, and much agitation, tremors, convulsions, and paralysis ; sometimes, these symptoms may be general,—at other times, only partial, implicating certain muscles.

Respiration is more or less affected ; sometimes labored, hurried, and not unfrequently stertorous, when the inflammation is severe.

Encephalitis in children, may often come on insidiously ; the child may be dull and restless, the pupils may be contracted, and there may be sensibility to light and sound, and more or less headache. These symptoms should always enlist the attention of the physician, or before he is aware, convulsions, or some other more positive signs of encephalitis may occur. Sometimes, inflammatory fever and congestion precede encephalitis, or violent delirium may be the only indication of its presence. But this symptom may exist, when there is merely fever without the actual existence of encephalitis, disordered bowels in children during febrile affections, are often attended with slight delirium, which is sympathetic, rather than actual inflammation of the encephalon.

As a general rule encephalitis in the first stage is indicated by exaltation of the functions of sensibility and in the second and final

stage the patient sinks into insensibility, coma or paralysis, with dilated pupils that do not contract on the approach of light.

Sometimes the disease destroys in a day, at others it is protracted and passes through several stages and ends in restoration to health or gradual sinking away. Often in cases of recovery, some of the functions are liable to remain permanently impaired, strabismus, deafness, and dementia, have been the most commonly observed.

**CAUSES.**—There are numerous causes that may bring on encephalitis; external violence, falls producing concussion of the brain, a fall of considerable force upon the breech or feet, may induce it, though it may be weeks before the inflammation supervenes, exposure to a hot sun, too free an indulgence in the use of stimulants, as wine or alcoholic drinks, excessive mental exertion, teething in children and febrile diseases generally may determine themselves to the head and produce encephalitis.

**TREATMENT.**—The remedies employed in the treatment of this disease, are for the most part, *Aconite*, *Arnica*, *Arsenicum*, *Bella-donna*, *Bryonia*, *Chamomilla*, *Cuprum metallicum*, *Hyoscyamus*, *Ignatia*, *Ipecacuanha*, *Mercurius*, *Nux vom.*, *Opium*, *Pulsatilla*, *Phosphorus*, *Petroleum*, *Rhus tox.*, *Sulphur*, *Sepia*, *Stramonium*, *Spigelia*, *Tart. emetic*, and *Veratrum*.

When there is an exaltation of the senses, and a dread of light and noise, and considerable headache, which appears to be increasing in severity, and there is any disturbance of the nutritive functions, heat in the head, full, quick pulse, and general febrile condition of the system, *Aconite* should be administered at short intervals until relief or change.

Where the symptoms of encephalitis supervene upon a fall or blow, producing concussion of the brain, and particularly when there is pressing headache in the forehead with heat in the head; the body being cool or naturally warm, jerking, tearing or stitches in the head, tingling around the eyes, empty eructations and inclination to vomit, *Arnica* may be administered and repeated at intervals of one or two hours until amelioration or change.

If there is beating pain in the forehead, excessive anxiety and chilliness, or general coldness, followed by fever and vomiting, or with indistinct chilliness and heat, with humming in the ears, burning in the hypogastrium, and great thirst accompanying the usual symptoms of encephalitis, great prostration, or sudden and

excessive debility, and especially if the pain in the head is ameliorated by cold applications, *Arsenicum* may be used with advantage.

In the commencement of an attack when there is severe excruciating pain in the forehead and vertex, attended with vomiting and burning thirst, pains in the orbits, and violent aching through the eyes, ringing and roaring in the ears, feeling of distension and throbbing in the head, delirium, somewhat violent, coming on from the excitement of noise or light, and especially if these symptoms occur from a sudden cold, attended with redness of the skin, bloated face, *Belladonna* may be used in alternation with *Aconite*. And also if the delirium and wakefulness is followed by *coma*, *Belladonna* may still prove of service repeated at intervals of two or three hours.

In cases where there is severe gastric derangement at the commencement, and burning in the stomach during motion, and great fulness of the head, and excruciating pain, pressing in the brain, either from within outwards, or the reverse, aggravated by the slightest motion, or when the encephalitis is of a typhoid character, *Bryonia* may be given at intervals of one or two hours until the bilious vomitings cease, or there is occasion for change of remedy, and also when the pain in the head is confined to one side, attended with vomiting, and followed by delirium, and when there is short or hurried respiration and delirious talk about business at night, and heat in the head and face, and fever of a typhoid character, *Bryonia* in alternation with *Aconite* may be administered at intervals of two hours.

Encephalitis supervening upon the teething of children, attended with an irritable and sensitive condition of the nervous system, vomiting of greenish matter from the stomach with tendency to torpor, or half-sleep or sleeplessness, screaming, starting and tossing, or moaning when asleep, and heat in the head, redness of the conjunctiva, and spasmodic closing of the eyes, or distension of the eyes, *Chamomilla* may be given at short intervals, or when vomiting of greenish matter from the stomach precedes convulsions, and when the convulsions are succeeded by *coma*, *Cuprum metallicum* may be given at intervals of four or six hours until amelioration or change; and, also, when the child exhibits a pale complexion, spasmodic distortions of the face, blue

lips, and unsteady motion of the eyeballs, *Cuprum* will be found of great service.

*Cuprum* is also of great service in inflammation of the brain of adults when the cerebrum is chiefly affected, when there is severe vomiting attending the delirium, and especially when the patient in the commencement of the attack complains of bruised sensation in the head.

When there is drowsiness and loss of consciousness with delirium about one's affairs, or when there is singing, murmurs and laughter, picking the bed clothes, starts and screams, *Hyoscyamus*.

If the patient is disposed to weep, with frequent paroxysms of crying and sobbing as if the heart would break, *Ignatia*: and also in the commencement of an attack when the patient complains of headache, as if from a nail in the brain, and when the head inclines backwards with convulsive movement of the eyes and lids.

If the attack comes on with coldness of the hands and feet with intense excruciating pain in the forehead, and nausea and vomiting, pale face, convulsive twitching of the facial muscles and of the lips, and aversion to every kind of food, constant gagging, sobbing breathing, and where there is a peevish, fretful delirium, and also when there is looseness of the bowels with dysenteric stools, and frequent paroxysms of pain in the bowels, *Ipecac.* may be given with some hope of affording relief, and also in the commencement of an attack, when there is a violent distress in the stomach and pit of the stomach.

When encephalitis supervenes upon gastric and biliary difficulties from the abuse of Cinchona or Quinine, and particularly when in the commencement of the attack there is a violent pain in the head as if it would fly to pieces, or tearing burning headache followed by delirium and intolerance of light, profuse lacrymation, stitches in the ears, burning and smarting of the eyes, pale complexion, inflammatory fever and disposition to perspire, *Mercurius* may be given every three hours until a change in the symptoms.

In cases occurring in sanguine and choleric temperaments subject to hemorrhoids, when the pain in the head comes on from cold, or intense mental application, or from the use of wine and other intoxicating drinks, *Nux Vomica* and *Arsenicum* may be used with advantage.

In deep-seated inflammation, characterized by coma or low

muttering delirium and convulsions, general torpor of the nerves, sleep with half consciousness, coldness of the skin, or, at times, burning heat of the body with redness of the face, pulse full and slow, *Opium* may be given and repeated at intervals of four hours.

Cerebral inflammation in young girls near the age of puberty that appears to result from the struggle of passing into the menstrual period, may be controlled by the use of *Aconite* and *Pulsatilla*, and especially if there is a tendency to convulsions and frequent attacks of epistaxis. If signs of hyperæmia precede the encephalitis, *Belladonna* may be administered, to be followed with *Pulsatilla*, and especially if the attack is preceded by jerking and tearing and drawing in the muscles, or if it occur from suppression of menses, or after frequent attacks of rush of blood to the head.

Encephalitis attending acute diseases, such as scarlatina or small pox, attended with redness of the eyes, face pale and sunken bloated face, with constant gagging and disposition to vomit, dryness of the throat, disposition to coma, *Phosphorus*, repeated at intervals of an hour, may be employed with advantage.

*Petroleum* may be used when there is severe throbbing pain in the occiput with excessive languor, loss of memory, and coldness of the hands and face.

In cases of typhoid fever where there is great prostration and cerebral inflammation, indicated by coma and delirium, inflammation of the eyes, and derangement of the kidneys, *Rhus tox.*, and particularly where there is any erysipelatous tendency this remedy has been found of great service.

In psoric constitutions where inflammation of the brain has been brought on by suppressed eruptions, *Sulphur* may be repeated every twenty-four hours until a change.

Encephalitis characterized by sleep which is almost natural, but with jerking of the limbs, moans, tossing and mental absence after walking, or when there is a fixed look and desire to withdraw in a slow and timid manner, or to run away with cries and fear, violent feverish heat, redness of the face, and moisture on the skin, *Stramonium*.

*Spigelia* and *Cina* have both been found useful where there is vomiting with clear tongue; these remedies are particularly useful for children subject to worms, and also when the disease is superinduced upon invermination. In the commencement when there is

severe pain in the head from the least exercise aggravated by noise and shocks in the occiput.

*Tart. emetic* is indicated when the attack comes on with violent straining, retching and vomiting of acrid and acid matters or mucus from the stomach, and when this is followed by painful pressure in the eyes, oppressive constrictive headache, as if the brain were agglomerated into a ball, and followed by delirium or stupor as if the inflammation were deep-seated.

*Veratrum*, *Viola odorata*, and *Viola tricola* are severally remedies that may be consulted for cases of inflammation of the *encephalon*. The remedies best suited to deep seated inflammation where the intellect remains entire or only slightly impaired are, *Sepia*, *Spigelia*, *Sulphur* and sometimes *Arnica*, *Phosphorus* and *Arsenicum*.

*Hygienic Treatment*.—Patients suffering from encephalitis, should, if possible, be placed in a well ventilated apartment, where the air can circulate freely through the room, and the room should be in a perfectly quiet place, so as to shut out the noise from the streets and from other sources; the windows should be darkened so as to exclude the light, in a great measure, although it would be well, during the day, to admit a moderate degree without subjecting the patient to the action of a glare of light at any time.

All perfumery, of every description, should be kept out of the room—no cologne, whisky or alcohol, in any form should be allowed about the patient, and flowers or green plants should be entirely excluded from the room.

It has been recommended to put ice to the head of encephalitic patients, without exercising any discrimination, but this practice has a pernicious tendency, and without doubt, the chances for a cure are more frequently diminished than augmented by the practice; and this would seem reasonable from the fact that cold applications not only abstract the heat, but effectually close the pores, so as to interrupt the necessary exhalations from the surface. Experience assures us that cold applications to the head when perspiring, throws the fluids escaping from the external surface back upon the mucous and serous surfaces, producing severe nasal catarrh, and hastening the formation of water in the sub-arachnoid cavity, or causing the inflammation to merge into hydrocephalus more rapidly than it otherwise would. In deep-seated inflammation the practice is entirely to be discarded, but when the disease

is mainly confined to the membranes, it may prove of service. The use of warm water, applied by saturating cloths, has been found by those who have tried the experiment, much more serviceable. We have witnessed a number of cases where the application of warm fomentations afforded speedy relief after the use of remedies and cold applications had failed of producing any perceptible good results. We have recently seen a cure of coma of several days standing, speedily effected by the application of warm fomentations to the head.

A child of Mr. A., aged three years, had been ill ten days with cerebral inflammation, which was characterised by furious delirium, at first, and afterwards by deep coma and speechlessness. Up to the time when we first saw the little sufferer, cold applications had been made to the head by his allopathic attendant. We prescribed *Belladonna* and the use of cloths saturated with warm water, upon the head, and the little patient in twelve hours became aroused from the *coma*, and soon manifested signs of recovery.

In case the bowels are constipated in encephalitis, so that no natural evacuation takes place, an *enema* of moderately cold water may be employed, and especially if there appears to be any fulness or hardness or distension of the bowels. But cathartics should never be used, because the irritation they occasion is likely to cause a sympathetic action of the brain, tending to aggravate rather than diminish the existing difficulty.

*Diet*.—Nothing but thin gruel should be allowed during an attack of inflammation of the brain, and this should be given a spoonful at a time and frequently; very weak chicken-soup may sometimes be substituted for the gruel, and in case the patient manifests unmistakable signs of convalescence, it is better to still continue a very light diet for some time, gradually increasing from gruel to something more substantial.

## MYELITIS.—INFLAMMATION OF THE SPINAL CORD.

The spinal cord appears to be a continuation of the brain down the spinal column, and like the brain itself, is subject both to acute and chronic inflammations. These two forms, however, do not differ materially from each other in their characteristic symptoms, therefore the disease may be described as follows:

*Symptoms.*—Disorder in the movements, pain in the region of the spine wherever the inflammation occurs, various effects produced upon the muscles, sometimes sprains, permanent contractions, involving either one or several of the muscles ; sometimes with paralysis and sometimes without, in the parts which receive their nerves from the affected portion of the cord. When the meninges are only implicated, it is believed that nothing more serious occurs than spasm ; but when the cord or medulla is the seat of inflammation, paralysis will generally attend the difficulty. The pain felt in some portions of the spinal column, is generally augmented, when the patient moves or bends the spine. It may also be augmented by percussion —a jar may also be sensibly felt. But pressure upon the vertebrae or spinous processes can afford but little aid in detecting the inflammation.

Sometimes the pain extends down the back and the extremities, in the course of the great nervous trunks, and is either intermittent, or continuous ; not unfrequently the pains appear like rheumatism or neuralgia, and on this account, these affections have been erroneously mistaken for spinal inflammation.

Sensation is sometimes destroyed in the parts that receive the nerves from the inflamed portion of the cord ; or if not wholly destroyed, it seems very much impaired, as indicated by numbness or formication in the fingers and other portions of the extremities, and these symptoms may appear more and more distinct, until total insensibility results.

The digestive system may be more or less impaired ; at times there is difficulty in swallowing. The reflex nerves coming from the inflamed medulla, thus affects deglutition, and may be regarded as one of the early indications of myelitis. The function of digestion is

more or less retarded, and as a consequence, constipation usually accompanies the difficulty.

The circulation is greatly affected, when the disease is active; but myelitis may exist in a considerable degree, without causing any very striking departure from the normal condition of the pulse.

When the upper portion of the cord is involved in the difficulty, the function of respiration is more or less disordered. Inspiration becomes difficult, or almost impracticable. The diaphragm becomes the subject of irregular spasmodic contraction, oceasioning constant hiccough, gradually tending to asphyxia.

When a lower portion of the cord is affected, the urinary and genital organs lose their power, so that retention of urine and impotence result. Or in some instances the reverse may take place; the genital organs may be greatly excited, and the ability to retain the urine may be lost.

In pregnant females, the power of contraetion in the uterus is sometimes lost, while at other times its contraetion is stimulated, and the delivery is easily effected.

Inflammation of the spinal cord and its membranes, presents many symptoms in common with neuralgia, hysteria, and the various phenomena that writers have elasssed under the head of spinal irritation.

Sometimes inflammation of the spine may continue only a few days, at other times it becomes chronic, and impairs the nutrition of the whole system. In most acute attaeks, there is reason to hope for a favorable termination, although in some severe cases, the inflammation may extend to the brain, and destroy the patient.

**CAUSES.**—The causes of myelitis are related to those of encephalitis; blows, falls, or mechanical injuries of any kind, may occasion it. It may arise from cold, or any influence that deranges the capillary action.

Those cases that have terminated fatally, present the following post-mortem appearances: injection of the vessels, tumefaction, suppuration and induration; and sometimes the continuity of the cord had been destroyed by the softening and breaking down which the disease had oceasioned; previous to the fatal termination, those parts supplied with nerves from the diseased portion of the cord, were completely paralyzed.

TREATMENT.—The remedies employed in the homœopathic treatment of this difficulty, are *Aconite*, *Arsenicum*, *Balladonna*, *Bryonia*, *Causticum*, *Cocculus*, *Digitalis*, *Dulcamara*, *Ignatia*, *Lachesis*, *Nux vomica*, *Pulsatilla*, *Rhus tox.*, and *Veratrum*.

*Arsenicum*, when there is a violent burning pain in the back, aggravated by contact. Tearing or drawing pain in the back, between the scapulæ, and great prostration and difficult inspiration. When there is general febrile symptoms accompanying the pain in the back, and other symptoms, such as paralysis or numbness of the extremities, *Aconite* may be called into requisition.

When there is stiffness of the nape of the neck, paralysis and stiffness of the arms, heaviness and lameness of the lower extremities, short, hurried respiration, danger of suffocation when swallowing, and pressure at the chest, retention of urine, or involuntary emission of the urine, spasms or convulsions, in plethoric subjects, and severe pain in the dorsal region of the spine, *Belladonna*.

When there is pain in the small of the back, and painful stiffness, not allowing one to stand erect, or pain in the small of the back, as if bruised, when at rest, crampy contractive pain over the whole back, gastric difficulties and constipation, involuntary urination, fatigued sensation in the lower extremities, and pain in the back, from the slightest motion, *Bryonia*.

If there is paralysis, chorea, and contraction of the tendons of certain muscles, and painful stiffness of the back, dull, drawing and tearing pains in the arms and hands, contraction of the fingers, rigid feeling in the joints of the legs and feet, palpitation of the heart, *Causticum*.

For lancing, drawing or tearing by turns, and continuing in the extremities, as if in the bones, sensation of constriction of the internal organs, pains which appear on one side only, spasms and convulsions of the extremities and whole body, paralysis and especially hemiplegia; weak, exhausted trembling, want of animal spirits, and other derangements, attendant upon inflammation of the spinal cord, *Cocculus*.

When the patient is subject to gastric affections, cold hands and feet, and great nervous debility, pale face, and drawing pain in the small of the back, after a cold; also when there is increased action of the heart, tension and stiffness of the cervical muscles, *Digitalis*.

When inflammation of the spinal cord proceeds from a cold, attended with drowsiness in the day time, internal uneasiness, difficulty of speech, and paralysis of the tongue; or when attended with diarrhoea, violent pains in the loins, lameness of the arms, &c., *Dulcamara*.

When there is evident inflammation of the cord, attended with vertigo, deep sleep, spasmodic yawning, opisthotonus, convulsive twitchings of the arms, and convulsive jactitation of the lower limbs, *Ignatia*.

If there is weakness and inability to support the back, with weakness of the knees, and sense of suffocation, by reason of difficult inspiration, *Lachesis*,

In plethoric persons, when there is inflammation of the cord, and pain in the back and small of the back, as if bruised; oppression of the chest, as if from a load, and sometimes a forcible racking cough — *Nux vomica*.

When there are present the general symptoms of inflammation of the cord, attended with itching of the spine, feverish sopor, hypochondria, ill humor, especially in damp, foggy weather, palpitation of the heart, semilateral head-ache, abdominal spasms, retention of the urine, constipation, flatulent colic, tenesmus of the bladder, pain in the small of the back and back, curvature of the spine, tension and drawing in the lower extremities, *Pulsatilla*.

If there are unmistakable indications of spinal irritation, with rheumatic and arthritic tensions, drawing and tearing in the limbs, erysipelas, spasmodic yawning, oppressive fulness of the head, drowsy after eating, anxious oppression of the chest at night, tremulous feeling about the heart, bruised feeling and pain in the small of the back, opisthotonus, rheumatic stiffness of the nape of the neck, curvatures of the spine, *Rhus tox*.

When there is general weakness of the body, in connexion with spinal irritation, and rheumatic tearing pains in the limbs, abdominal spasms, oppressed respiration, severe pain in the back, and particularly in the small of the back, alternate constipation, and prostrating diarrhoea, and sometimes paralysis of the lower extremities, *Veratrum*.

It is an excellent remedy after *Nux vom*.

There are many other remedies that may be consulted, in the

treatment of this disease. The habit of resorting to blisters or moxas, should be discarded.

DIET.—The digestive organs should not be severely taxed, during treatment for spinal irritation, or inflammation of the spinal cord. The digestible meats in moderation, may be used during the treatment for the chronic variety of the disease, in other respects, a simple farinaceous diet is sufficient.

#### ANÆMIA OF THE NERVOUS CENTRES.

By the term anæmia, is understood a paucity of blood in any part, and when applied to the nervous centres, means a paucity of blood in those regions. It has been remarked by some writers, that either a superabundance or paucity of blood in the vessels of the nervous centres, will give rise to nearly the same phenomena. For instance, at one time, coma and convulsions evidence a congested state of the encephalic vessels; at another time, this may supervene upon excessive losses, when it must appear palpably manifest that these vessels have been partially emptied of their contents.—From this fact, it may be inferred that anæmia of the nervous centres may result from general paucity of the blood, which of course may be occasioned by diarrhœa, or long protracted disease of any kind, or severe vital prostration. We may suppose such a condition of the nervous centres to occur in acute fevers, such as scarlatina, or severe inflammatory fevers of any kind, that are characterised by hyperæmia in some of the visceral organs, and consequent deficiency in the vessels of the brain.

SYMPTOMS.—Such as characterise extreme loss of blood, tottering, unable to stand, tremors, convulsions similar to epilepsy, may severally indicate anæmia of the nervous centres, provided they occur in females recently delivered, or who have sustained an immoderate uterine hemorrhage; or in males who have sustained great losses either in consequence of local hemorrhages or severe diarrhœa.—This latter disturbance often empties the blood vessels of the greater proportion of fluid which they contain, and of course detracts from the sustenance they afford to the nervous centres, and induces that peculiar condition which we term anæmia; cerebral apoplexy has resulted from severe losses of blood.

There are other symptoms that excessive loss of blood may produce, by causing anæmia of the nervous centres, which are to be viewed as the more remote effects of the difficulty, or rather the reaction, which may supervene in a few hours: as for instance, a female that has been almost drained of blood by flooding, in a short time afterwards, may experience headache, flushed face, beating of the temporal arteries, which cannot be allayed by depletion. Not unfrequently after such losses severe headache is met with, or severe oppression in some part of the head, with intolerance of light and sound, sleeplessness, slight delirium, with or without palpitations—all of which may be ascribed to anæmia of the nervous centres.

In persons who have died of convulsions, after having sustained severe losses of blood, the post-mortem appearances accord with the condition of the system. The encephalon is found to be pale, the vessels containing only a small portion of blood, and it is affirmed that the vesicular matter partakes more of this character than the fibrous.

**TREATMENT.**—The medicines that have the most decisive tendency to relieve the effects of anæmia of the nervous centres, are *Carbo veg.*, *China*, *Ferrum*, *Hepar*, *Ipecac.*, *Kali carb.*, *Natrum mur.*, *Nux vomica*, *Phos. acid.*, *Sulphur*, *Veratrum*.

*Carbo veg.*.—After severe diarrhoea, when there is weakness of memory, slow ideas, oppressive headache, and general weakness, coldness and chilliness and restlessness, pains and heaviness of the limbs, &c.

After severe losses of blood, when there is headache, loss of memory or weakness of the memory, and loss of strength, dullness of the head, vertigo, *China*,

If after a severe fever, or other acute suffering, in which the sanguiferous system has sustained considerable loss, there is debility, weakness of the memory, headache and heaviness of the limbs, and with all a paleness of the complexion, and general languor, *Ferrum* and *China* may both be employed.

If the body has been drained of the animal fluids by purgatives, and especially mercurials, so as to produce anæmia of the nervous centres, which is denoted by weakness of the memory, lightness of the head, vertigo, and noises in the head, *Hepar* may be found useful.

If after severe losses, as in case of parturition, there is headache,

and nausea and sickness at the stomach, *Ipecac.*—or if in case of hysteria or hysterical headache, *Kali carb.*, especially if there is vertigo with nausea.

In case physical and mental prostration and emaciation, produced by losses from onanism or over sexual indulgence, especially when there is any thing like paralysis, or hysterical affections, or epileptic convulsions, weak memory, unable to meditate, vertigo, with jerks in the head, and inability to collect one's senses, *Natrum mur.*

In sanguine and choleric temperaments, that have sustained severe losses from hemorrhoidal affections, followed by indications of anaemia in the nervous centres, such as headache, weak memory, hysterical affections, great prostration, almost amounting to paralysis, dread of motion, emaciation, and congestion of some of the internal organs, *Nux vomica*. China may also be employed in cases of this kind, and also sulphur, should *Nux vomica* fail of procuring decided relief.

In case of frequent debilitating emissions, being the cause of anaemia of the nervous centres, *Phosp. acid.* may be employed with advantage; and also this remedy may be employed when the same results from diabetis or prostrating diarrhoea, and discharges of grey stools, or involuntary and undigested.

Sulphur may be employed with advantage, when there is evident anaemia resulting from scarlatina.

*Diet and Regimen.*—In all cases where there is anaemia of the nervous centres, the recuperation of the system is the grand end in view, and to effect this, great caution must be exercised to supply the system with the kind of nourishment it requires, and such as it is capable of receiving. Immediately after the system has sustained losses, the diet should be nutritious, but composed of gruels and soups, such as will not be much of a tax upon the digestive organs. The diet may gradually be increased in strength, until that which is decidedly substantial may take the place of that which is less so. All condiments, except salt, should be entirely prohibited.

#### APOPLEXY—HEMORRHAGE IN THE NERVOUS CENTRES.

When a determination of blood to the nervous centres, causes a rupture of some of the vessels, there is hemorrhage in them, that gives rise to what is termed apoplexy. This term, however, has

been applied to congestions, where no hemorrhage takes place.—Hemorrhages may take place in different parts of the nervous centres, giving rise to various phenomena. 1st. They may take place at the external surface. 2d. They may take place in the cavities. 3d. They may take place in the nervous matter.

1. When it occurs in the external surface from the meninges, it may be seated between the dura mater and the skull, or between the dura mater and arachnoid. The symptoms in such cases may be those of compression, such as sudden loss of sensation, volition, and mental and moral manifestation. Some writers have termed this meningeal apoplexy, but these cases are believed to be of rare occurrence.

2. When hemorrhage takes place in the cavities there are also such symptoms as would denote compression, sudden loss of consciousness, volition and sensation, and not unfrequently paralysis.

3. But in the greater number of cases hemorrhage takes place in the very substance of the brain, either in the cerebral hemispheres or in those of the cerebellum, although seldom in the latter.

SYMPTOMS.—Many of these are premonitory, indicating merely hyperæmia before described, sometimes, however, these premonitory symptoms are entirely wanting; where the hemorrhage has actually taken place, it commonly induces symptoms not easily mistaken; there is complete loss of sensation, motion and mental and moral manifestation, prior to the hemorrhage there may be headache, vertigo and confusion, with numbness or sense of creeping in some parts of the surface, especially in those of the fingers and toes; the vision may be depraved, spots or sparks may appear before the eyes, and also appearance of cobwebs or flashes of light; sometimes the hearing is impaired, intonations or singular sounds, tinnitus aurium or susurrus, and the sense of taste and smell may also be impaired, but the two last senses rarely afford any symptoms that can guide us. These symptoms exist also in congestion, and may continue for days and even weeks and then pass away, but when they occur from actual hemorrhage they rarely disappear, and the impairment of the senses permanently remains. When the attack has been sudden, all attempts to arouse the patient to sensation will prove insufficient, and when the immediate apoplectic effects disappear, the sensibility of the part affected with loss of

motion does not return. Sensation may sometimes be restored, but motion not till after the elapse of a long time, if ever.

In severe cases, not only the encephalic but the spinal nerves lose their impressibility, so that the contact of any body with the lining membrane of the mouth, or of the oesophagus induces no muscular contraction. The sphincters, too, which belong to the true spinal system in their real relation, suffer a loss of power so that the several reservoirs discharge their contents involuntarily, also the conjunctiva which receives the fifth pair of nerves, which conveys both sensation and motion to the part, becomes impaired so that contact with the finger will produce no irritation.

The sight at first may be entirely destroyed, and remain so until sensation returns, and then perhaps it may be restored to one eye, while in the other it remains lost. This will in nearly all cases be the eye upon the paralyzed side.

Loss of motion or paralysis is the almost universal effect of hemorrhage in the nervous centres. It was shown under the head of hyperaemia that general paralysis may result from mere congestion of the nervous centres, which passes off as the congestion is removed. The paralysis, however, that follows hemorrhage generally comes on suddenly, concerns only one-half of the body, and remains more or less for the rest of the patient's life.

Andral mentions some rare cases of cerebral hemorrhage, where there was no paralysis, that proved fatal however, motility remaining to the last. A post-mortem examination disclosed large clots at the posterior portion of the right cerebral hemisphere; other authors have cited similar cases.

The degree in which paralysis is manifest varies, sometimes it is complete from the first; at others, the first indication may be a mere heaviness of the limb, or inability to grasp objects, but generally these symptoms go on augmenting, until complete hemiplegia is the result. These symptoms may be looked upon as being the fore-runners of hemorrhage, which an early precaution may sometimes avert.

It seldom happens that all the limbs become paralyzed from hemorrhage, though we may infer that such would be the result if it takes place in both cerebral hemispheres, or if that of one side is such as to compress the other. In this latter instance if the patient

survives, the clot may be diminished by absorption so that the compression may be removed, and motility may be restored to one side.

It has usually been observed that hemorrhage in either hemisphere will produce paralysis of the opposite side, generally of both the upper and lower extremities, though sometimes of but one only. The face, too, becomes implicated, and the muscles are paralyzed, the angle of the mouth is drawn upwards by the sound muscles of the opposite side.

Anatomists have anxiously sought for an exposition of this general law of decussation, and it is generally admitted that at the portion of the spinal cord at which the medulla oblongata unites, there is a crossing of the fibres of the anterior pyramids, or of those connected with motion, by which the fact, it is believed, may be explained. This will undoubtedly explain the general features of the phenomena. But this will not account for the face of the affected side being paralyzed on that side, but this may be explained from the fact, that the nerves supplying the face are derived from a portion above the point where the decussation takes place.

Hemorrhage into the cerebellum produces symptoms not unlike those resulting from the same in the cerebral hemispheres, and this fact has given rise to interesting questions in physiology concerning the decussation of fibres of the corpora restiformia.

Hemorrhage into the spinal cord may also produce paralysis of both the upper and lower extremities, according to the seat of the effusion; where hemorrhage has occurred in one of the anterior cords, hemiplegia has resulted on the same side of the lesion. The symptoms of spinal apoplexy are however observed.

When hemorrhage in the encephalon occurs, other voluntary muscles besides those of the limbs are affected with paralysis, as those of the eyelids, the tongue, the movements of which become so lost as to impair the power of speech.

Many attempts have been made to make the paralyzed portion the index of pointing out the precise seat of the hemorrhage, but although the researches have been arduous, there has yet been very little of a satisfactory character elicited.

When paralysis has once occurred, especially in the extremities, it may gradually improve and yet never disappear, though in many instances it remains stationary. The nutrition of the limb is always more or less impaired, when the paralysis entirely disappears; it is

probably owing to the entire absorption of the clot that has produced it, in which event the continuity of the nervous matter is restored so that the nervous action can be propagated through it.

In most all cases an attack of hemorrhage is preceded by some sign of intellectual disturbance, the mental acts are sluggishly executed, the patient is drowsy, scarcely able to keep awake, or otherwise there is great restlessness and unusual mental excitement; the former symptoms however are the most frequently noticed. Not unfrequently varied hallucinations occur, which however may be indicative of other lesions. Some object may impress the sense of sight which the patient cannot rid himself of for months; this however occurs not so much as a precursor as that of an effect of previous cerebral disturbance; similar hallucinations occur in the other senses. Sounds are often heard as of voices calling to the individual, which have no existence only in his imagination. After these hallucinations occur and have existed for some time, unless the individual takes timely warning and uses every precaution, he is attacked with all the symptoms of encephalic hemorrhage.

In some unusual cases the mental faculties are not much impaired, though generally the reverse is the case. When the effusion takes place in the cerebral convolutions, the mental faculties are so much impaired as to produce imbecility, and when other portions of the encephalon are the seat, compression alone may impair the mental powers to a greater or less extent.

It has been observed that hemorrhage even in the spinal marrow has so reacted upon the encephalon as to impair the mental manifestation in a considerable degree.

If due credit is accorded to some singular facts which are found detailed by eminent authors, large portions of the cerebral hemispheres have been lost or injured without the mental manifestation being destroyed. This would seem to indicate that the seat of the mental endowment was nearer the base of the brain than has been generally imagined.

In some cases only the memory seems to be impaired, and no cognizance whatever of recent events is taken; only one event sometimes will be retained in the memory. All the phenomena that occur as the result of hemorrhage in the nervous centres cannot be referred to, although such must afford an interesting subject for research. The nervous centres being the primary seat of vital

endowment in the body, cannot receive too much attention, as something new and interesting is continually being developed, that requires constant attention.

The final result of cerebral hemorrhage is generally fatal; after the first attack the individual is liable to the second, which almost always occurs sooner or later, and so on the third, and it is only in some rare cases that recovery takes place so completely that the patient dies of some other disease.

CAUSES.—Those detailed as producing hyperæmia or congestion of the encephalon, may operate to produce hemorrhage, therefore, they need not be repeated. It may be remarked, however, that the difficulty occurs frequently in the torrid zone, where the subjects are exposed to the intense heat of the climate.

The aged are more predisposed to the difficulty than the young. It is much more common after forty years of age than before, males are more predisposed than females. There is reason to believe also that a particular conformation derived hereditarily may have some influence as a predisposing cause. Several instances are recorded, strongly tending to prove that it has occurred as a family disease. There are numerous cases that might be cited, to prove that there is a predisposition sometimes impressed on the organism, which may be developed by some slight exciting cause.

TREATMENT.—It is believed that the treatment of this formidable disease, with homœopathic remedies, will prove successful in many cases where the ordinary allopathic treatment would prove useless, if not injurious. It must be by noting accurately the premonitory indications, that timely treatment will prove availng in averting an attack. Therefore it is proper to make a division of the treatment. 1st. The treatment which is required during the first premonitions; and 2d. That which is required when the hemorrhage has actually taken place. The former has been sufficiently detailed, under the head of hyperæmia of the nervous centres, and need not be again repeated. The latter requires, for the most part, *Aconite, Arnica, Belladonna, Nux vomica, Pulsatilla and Sulphur*.

*Aconite* is the first remedy to be employed in sudden and violent attacks, when there is full bounding pulse, or general arterial excitement, loss of consciousness, and complete prostration, with flushed or swollen face. *Arnica*, when there is general paralysis, following a severe blow upon the head, indicating a hemorrhage in the nervous

centres. *Belladonna* when there is violent beating of the temporal arteries, followed by paralysis, or attended with paralysis of the face and limbs. *Nux vomica* is well suited to bilious, sanguine, or nervous temperaments, and is indicated when the patient vomits, and has no power of motion. *Pulsatilla* may also be called into requisition in complete apoplexy, when it occurs in persons of mild disposition, with entire loss of consciousness and speech, bluish red hue of the face, when there is violent palpitation of the heart, suppressed pulse. This remedy is better suited to the lymphatic temperament.

When the first symptoms have passed away, leaving partial paralysis, or paralysis of certain parts, *Nux vomica*, if there is paralysis of the left side. If only paralysis of the face, tongue and the muscles employed in deglutition, *Belladonna*, and afterwards, in psoric constitutions, sulphur may be employed advantageously. When there are signs of recuperation, or disappearance of the symptoms that usually attend hemorrhage in the nervous centres, the administration of remedies should be discontinued, so long as the patient appears to recover.

**DIET.**—The diet should be very simple, and free from any thing that would seem to indicate a tax upon the digestive function. Rice or other kinds of farinaceous gruel, would be indicated at first, before any mitigation of symptoms take place. Afterwards, as soon as the patient can take it, meat soup may be allowed; and if the system sufficiently recuperates to bear it, something more substantial may be permitted. In the treatment of this affection, it is customary to resort to violent friction upon the paralyzed members; but this is seldom attended with benefits. It may, however, be of some use to resort to dry rubbing with the hand, for the purpose of keeping up a vigorous circulation in the extremities. Pouring cold water upon the head, is another measure often resorted to, and may be attended with some benefit, especially if actual hemorrhage has not taken place.

#### SOFTENING OF THE NERVOUS CENTRES.

**SYMPTOMS.**—The principal symptom that indicates softening of the nervous centres, is pain, fixed to some locality, that appears to be of an unyielding character. It is not an unusual occurrence for the pain to be unaccompanied by any acceleration of the pulse. When

the softening occurs in the cerebral hemispheres, the intellect becomes more or less impaired, and sensation and motion are not so well accomplished, as in health. Sometimes both are deranged or obscured, although sensation at times may be augmented, while motion on the opposite side to the hemisphere affected is impossible. A common attendant on softening of some portions of the brain, is paralysis. Sometimes, however, instead of the limbs being affected with paralysis, they are more or less contracted and rigid.

It is, however, impossible to affirm that the symptoms detailed above are invariably an indication of softening, as they in general may attend other diseased conditions; and not much can be said about treatment, with reference to the pathological condition, as the symptoms must be the guide.

**CAUSE.**—Softening may arise from inflammation, or it may arise from failure of the circulation from arterial disease.

**TREATMENT.**—The remedies employed in accordance with symptoms that may give rise to fears of softening, are *Balladonna*, *Nux vomica*, *Sepia*, and *Sulphur*.

When there is severe pain in either cerebral hemisphere, that seems to be fixed and continuous, impairing the mind, and causing rigidity of the muscles of the extremities, *Belladonna* may be used daily for a week. If there is no mitigation of the pain, or relief of the other symptoms, and especially if there is any indication of paralysis, *Nux vomica* may be used daily for a week, provided there is no mitigation of the symptoms before the week passes away—in which event, it is better to discontinue the remedy. When there is pain fixed to a single spot, impairing motion, so that the patient cannot move about, *Sulphur* may be given and repeated every forty-eight hours. *Calcarea* may also be employed for other indications. (See *Hyperæmia of the cerebrum, cerebellum, and spinal cord.*)

#### INDURATION OF THE NERVOUS CENTRES.

This affection may exist in connection with hyperæmia, as the consequence of inflammation; but as there are no symptoms by which we can accurately determine this condition, aside from other difficulties that may be associated with it, the treatment must be according to symptoms, which may or may not be the consequence of such a lesion.

## ACCUMULATION OF SEROUS FLUID IN THE NERVOUS CENTRES.

As the nervous centres are enveloped by a serous membrane, which passes into the cavities, which like other serous membranes may be the seat of watery secretion, oedema or dropsy may result from the accumulation of such secretion.

Effusion is regarded as the result of inflammation, or rather as one of its terminations. Encephalitis has been regarded the source of hydrocephalus, or dropsy of the brain. It may also result from hyperæmia, no matter how produced, by transudation occurring through the coats of the over-distended vessels. This is probably the way in which *serous apoplexy* occurs, and the same symptoms may be present, as are seen in connexion with hemorrhage in the nervous centres; so that it is difficult to distinguish between the two. Either may exist alone, or both may exist at the same time. When this serous accumulation supervenes upon acute inflammation, it is the *hydrocephalus acutus* of writers; but sometimes the chronic stage is met with, especially in persons of more advanced age, in whom sensation, motion and intelligence have severally become impaired. The stupidity of the insane has sometimes resulted from chronic oedema of the brain. Whenever a serous effusion takes place in the brain, it produces compression, and manifests nearly the same symptoms as are found in connection with hyperæmia, or *hydracephalus acutus*.

When the fluid accumulates in the spinal sheath, as is sometimes the case in infants, the spinous processes are cleft, or there is what is termed *spina bifida*, so that the membranes protrude, and the compression is diminished.

It has been remarked, that acute hyperæmia of the encephalon is often the consequence of inflammation, or of hyperæmia. The symptoms are often so obscure, that we cannot determine precisely the cause of the compression; but the accumulations of fluid which occur in a more chronic form, generally exhibit their existence by unequivocal symptoms in the bony coverings. The serous fluid, if contained within the cranium, distends the parieties of the cranium, causing the head at times to acquire an enormously large size, constituting the chronic hydrocephalus, or dropsy of the head.

TREATMENT.—As the accumulation of serous fluid in the nervous centres may present a varied phase, as well as many degrees of

severity, many remedies may be called into requisition. The remedies for the most part employed are Aconite, Arnica, Arsenicum, Belladonna, Digitalis, *Helleborus niger*, Hyoscyamus, Mercurius, Nux vomica, Pulsatilla, Rhus tox. and Sulphur.

When there is acute pain in the head, and vomiting, with acute febrile symptoms, Aconite may be administered every three hours. When the pain and inflammation has been produced by concussion, giving rise to symptoms that indicate compression from serous effusion, *Arnica* may be substituted for *Aconite*, and repeated every three hours, until some mitigation of the symptoms is witnessed.

When there is a small quick pulse, and frequent disposition to vomit, dry, white tongue, heat in the head, stupor and great prostration, *Arsenicum*.

When there are the following indications of serous effusion, viz., great heat in the head, bloated and red face, strong pulsation of the arteries of the neck, severe pain in the head, and inclination to bury it in the pillow, or moving the head from side to side, frequent flushes of heat, eyes sparkling, and protruding with wild expression, contraction or dilatation of the pupils, drowsiness, &c., *Belladonna*. When there is intense action of the heart and arteries, attending the usual symptoms, *Digitalis*. When there are convulsions, loss of consciousness, or inarticulate speech, redness of the face, fixed look, white coating upon the tongue, dry and parched skin, thirst, and picking at the bed clothes, *Hyoscyamus*. Mercurius is suitable to employ, after *Belladonna*. *Pulsatilla* in females, when there has been an interruption of the menses. *Rhus tox.* may be administered, when the signs of effusion become manifest, during an attack of erysipelas. Sulphur may very generally be employed in chronic effusion of serum into the nervous centres, especially with *Belladonna* and *Mercurius*.

The calling of the attention merely to serous effusion in the nervous centres, producing hydrocephalus, serous apoplexy, &c., is by no means for the purpose of inducing the habit of treating the disease from the name, but to point out a pathological condition that may exist, in connection with certain symptoms, which of course must be the guide in treatment.

DIET, when under treatment, must be exceedingly simple, farinaceous gruels for the acute form, and also light and nutritious food for the chronic.

## MORBID FORMATIONS IN THE NERVOUS CENTRES.

ALTHOUGH morbid formations may and do take place in the nervous centres, we have no symptoms demonstrative of their presence, except such as may denote other diseased conditions. It is, nevertheless, a fact, that *adipous*, *fibrous*, and *osseous* formations do occur in the nervous centres.

*Tubercular, scirrhous, and encephaloid transformations*, have been known to exist, but the symptoms produced by them, are at best equivocal, and can afford no certain indication to distinguish them from other chronic lesions of the nervous centres. Paralysis, convulsions, or meningeal inflammation may result from some of these transformations, and the same may arise from other causes, and as the treatment in both cases would be in accordance with symptoms, but little practical importance is attached to a mere pathological view of the matter.

**TUBERCLES** may be indicated by impairment of sensation and motion, but as this may arise from other causes, it cannot be regarded as pathognomonic.

*Scirrhous and encephaloid productions*, less common than tubercles, can only be suspected as to their existence during life, although their size may vary somewhat, as well as the position they may occupy in the nervous centres.

*Calculi, or calculous secretions*, have been found in the nervous centres, the greater proportion in the cerebral hemispheres, and yet no symptoms have been manifest during life, that could determine their existence. Therefore, in the treatment of unknown difficulties, the symptoms alone must be the guide. When certain symptoms indicate unerringly, certain lesions, both the lesions and the symptoms connected with them may be taken into account in the treatment; but when symptoms simply indicate a difficulty in determinate, they may as accurately point out the true remedial agents to be employed, as if the nature of the precise formations corresponding with the symptoms were known. Other formations than those which we have named, have been found on dissection, in the nervous centres; facts elicited from post-mortem examinations, seldom afford any other satisfaction than a knowledge of what had been in connection with the symptoms previous to death. When we note a

symptom we unavoidably connect it with a cause, and although post-mortem appearance may not be so available in a practical point of view as ante-mortem appearance or symptoms, yet there often results a satisfactory solution of fatal difficulties, by a resort to autopsy, that would otherwise inflict upon the mind, wearisome states of suspense, as well as fruitless conjecture.

#### DISEASES SUPPOSED TO HAVE THEIR SEAT IN THE NERVOUS SYSTEM.

We have been considering diseases of the nervous system thus far, of an organic character, which generally produce lesions discoverable on dissection; and we have yet to consider many important affections, which unquestionably, are the result of an irritation of the nervous centres, although no lesions are found to confirm the fact. These affections are manifest in disordered sensation, volition, and mental manifestation. The term *neuroses* has generally been applied to denote affections of this character.

#### AUGMENTATION OF SENSIBILITY.

It sometimes happens that one or more of the special senses becomes so quickened as to take cognizance of impressions that would otherwise be unobserved. All the senses are subject to this kind of exaltation. As for instance, in the example of the sense of sight, the patient may be unable to discern objects distinctly in the light of day, but as twilight and even the darkness of the evening approaches, objects can be readily discerned. This difficulty may be caused by remaining a long time in a dark place, as in mines. The sense of hearing may be so much exalted as to render the patient unable to bear the least noise. Both exaltation of the sight and hearing, generally accompanies encephalitis and various cerebral diseases.

The sense of smell, from some morbid action, may become exalted in the most remarkable manner. The degree of exaltation has been such as to enable the subjects in some cases, to readily distinguish persons in the dark. Cloquet relates a remarkable exaltation of this sense in one suffering from fever, who was unable to tolerate

the disagreeable and overwhelming odour of copper, which was found to have been exhaled from a pin which had accidentally dropped in his bed. In cases of decided and strange antipathies to certain animals, the sense of smell has been so augmented, as to detect their presence when unobserved by others.

The sense of taste also, by certain kinds of diseased action, becomes immeasurably exalted, though seldom in comparison with the other senses.

The sense of touch also becomes very much exalted, sometimes, however, confined to a single part, at others, it extends entirely over the cutaneous surface (*hyperesthesia*), and is so excessive, that the individual is unable to bear the slightest pressure. This diseased condition is frequently met with in persons suffering from neuralgia, and frequently it may be regarded one of the most prominent symptoms of that affection.

Supersensitiveness of touch may in some instances be regarded as a premonitory indication of encephalic disturbance, more frequently manifest in persons of extreme impressibility.

Instances are sometimes met with, where individuals are so highly impressible, as to be disturbed by the slightest impression made upon any of the senses. Such persons are usually termed "nervous," and are found among the subjects of the mesmerist.

That there are various degrees of impressibleness is evident from the fact that some persons are more sensitive than others. Some will faint when any unusual impression is made upon the senses, others will perceive on the account of an exaltation of common sensibility, the minutest changes in the atmosphere, so as to be disagreeably affected. Some persons suffer almost intolerably from slight ailments, that would hardly be noticed by others.

**CAUSES.**—Excessive impressibility of the nervous system may result from various causes. Long-continued mental exertions may give rise to it, or any other circumstance calculated to exhaust the nervous system. Such as want of sleep, great fatigue, or excessive evacuations of any kind, and abstinence from excitants and stimulants to which the system has been habituated.

**TREATMENT.**—Where extreme irritability or impressibility appears to be connected with an apparent cause, this, of course, will have to be removed, in order to ensure a cessation of the effect. The Hygienic treatment to be observed, when the patient's strength will

admit of it, is exercise and travelling in the open air,—and also by moral discipline of the mind,—a wholesome nutritious diet, and frequent change of scene.

The remedies employed in the homœopathic treatment, are *Aconite*, *Belladonna*, *Bryonia*, *Calc.*, *Conium*, *Hepar sulph.*, *Drosera*, *Hyoscyamus*, *Lycopodium*, *Nux v.*, *Opium*, *Pulsatilla*, *Sepia*, *Sulphur*.

In *Nyctatopia*, where the patient is unable to see by day, but readily distinguishes objects by night, *Aconite*, *Belladonna*, *Conium* and *Hyoscyamus* are remedies that may be consulted.

In *hyperacusis*, or morbid exaltation of the sense of hearing, so that slight noises become almost unbearable, *Aconite*, *Belladonna*, *Cham.*, *Coffea*, *Lycopodium*, and *Nux vom.*, may be consulted.

In *Hyperosmia*, or morbid augmentation of the sense of smell, *Baryta carb.*, *Belladonna*, *Hepar sulph.*, *Lycopodium* and *Sulphur*, may be found useful in removing the difficulty.

In *hypergeusia*, or morbid sensibility of the organ of taste, *Calcarea*, *Lachesis*, *Carbo veg.*

In *hyperaphia*, or excessive acuteness of the touch in general, or in other words, extreme impressibility, *Nux vom.*, *Opium*, *Pulsatilla*, *Sepia* and *Sulphur*.

In persons of lymphatic temperaments, highly susceptible to cold or depression of spirits in cloudy or damp weather, *Pulsatilla*. Great sensitiveness to pain may be overcome by *Mercurius*. Or if mercurial drugs have been the cause, *Sulphur* and *Hepar Sulphur* may be employed. The solution of the remedy will in most cases depend upon the general condition of the system, and the nature of the disturbance that has given rise to the difficulty.

#### DIMINUTION, OR DEPRIVATION OF SENSIBILITY.

\* *Anæsthesia*, or loss of general sensibility, is a condition of the system that may be induced by some morbid condition of the nervous centres; sometimes it is only partial, at others it is complete. At times, only one side is affected in this way, while the other appears to be in a state of hyperæsthesia. When there is complete loss of sensibility, the contact of boiling water or hot sealing wax will produce no pain.

CAUSES.—Tumors pressing upon the nerves; interfering with

their continuity; poison of lead, and other obscure causes may give rise to the lesion.

TREATMENT.—The principal remedies employed in the treatment of this difficulty, are *Aeon.*, *Arnica*, *Nux vom.*, *Pulsatilla*, *Calcarea* and *Sulphur*.

When there is acceleration of the circulation; febrile heat; dry tongue and thirst, attending the diminution or loss of sensibility in a part, *Aconite* may prove effectual in removing the difficulty.

When sensation of a part has been impaired by a blow or concussion or some mechanical injury, *Arnica* may be employed.

When loss of sensibility supervenes upon rush of blood to the head in plethoric persons, *Aconite*. If in females, it occurs at or near the menstrual period, *Pulsatilla*. If the loss of sensibility be realized in one arm, while at the same time there is an augmentation of sensibility in the other, *Aconite* and *Nux vomica*, or perhaps *Calcarea* and *Nux vom.* may be employed in alternation at intervals of six or twelve hours.

When there is total loss of sensibility in the lower extremities, *Sulphur*, and perhaps *Conium*.

In case of the difficulty being produced by the poison of lead, *Sulphur*, *Hepar sulp.*, *Nux vom.*, and other remedies may be employed, while at the same time, the patient should quit his occupation in lead and allow sufficient time for his system to recover from its effects.

In nearly all cases of loss of sensibility, whether confined to a part or the whole surface, external friction may be demanded, douches of warm or tepid water, and sometimes of cold water. And also electricity may be successfully employed in cases of the kind.

#### PERVERTED SENSIBILITY.

All the senses are subject to varied disturbances that arise from obscure causes. Only one of the special senses may be involved at a time, and this to a degree that amounts to an entire perversion of its normal use.

*Paraphia*, or perversion of the sense of touch, may be so manifest as to convey constantly, erroneous impressions in regard to shape, size, consistence, weight and temperature of bodies.

*Parageusia*, or perversion of the sense of taste, may be so apparent as to allow of the most disgusting objects to be taken as food with the highest relish. This condition is sometimes attendant on pregnancy, and also in chlorotic patients, who sometimes fancy slate pencils, charcoal, pipe clay, ashes, &c., in preference to articles that are eatable and relished in health. To change this condition, *Antimonium crud.*, *Bryonia*, *Coccus*, *Ipecac.*, *Nux vom.*, *Oleander*, *Petroleum* and *Pulsatilla*, may be consulted.

*Parosmia*, or perversion of the sense of smell, may be such as to render what is disagreeable in health, perfectly agreeable; sometimes the olfactory nerve is so affected as to produce illusory smell, that may be obviated by appropriate remedies: as for instance, when there is illusory smell of brandy, *Aurum* is the remedy. When as of something burnt, *Anacardium*, *Aurum*, *Graphites*, *Nux vom.* When produced by catarrh, *Pulsatilla*, *Sulphur*. When of cheese, *Nux vom.* Of coffee, *Pulsatilla*. Of lime or chalk, *Calcarea*, *Magnesia carb.* When disgusting, *Cantharides*. As of spoiled eggs, *Calcarea*, *Magnetus Polus Arcticus*. When depraved, so as to render assafætida agreeable, *Aurum*, *Bell.*, *Phos*. When illusory of gunpowder, *Calc.* Of herring, *Agnus castus*, *Bell.* Of burnt horn, *Pulsatilla*. Of manure, *Anacardium*, *Calcarea*, *Veratrum*. Of musk, *Agnus castus*. Of pitch, *Arsenicum*, *Conium*. Of pus, *Seneca*. When putrid, *Aurum*, *Bell.* Of smoke, *Sulphur*, &c., &c.

*Paracusis*, or perversion of the sense of hearing, presents itself in various forms, but mainly connected with diseased conditions. When there is a sensation of hissing, *Graphites*, *Kreosotum*. Of humming, *Ammonium carb.*, *Belladonna*. Of reports, *Graphites*, *Kali carb.*, *Staphysagria*. Of ringing, *Ambr.*, *Calc.*, *Con.* Of roaring, *Aconite*, *Aurum*, *Baryta carb.*, *Belladonna*, *China*, *Crocus*. Of thundering, *Graphites*, *Platina*. When any of these symptoms are prominently attendant upon diseased conditions of the system, they may be taken into account in directing the remedy to be employed.

*Paropsis*, or perverted vision, may be so marked as to produce many strange anomalies, as *Diplopia*, or double vision; *Hemiopia*, or seeing one-half of objects; and *Pseudosblepsia*, or seeing objects that have no existence. Many of these are symptomatic of various diseases of the nervous system, and may be made to disappear by the treatment of these diseases, in accordance with the totality of

the symptoms. For double sightedness, *Bell.* and *Cicuta*. For Hemiopia, *Bell.*, *Hyoscyamus*, *Mercurius*, *Stramonium* and *Veratrum*. For *Pseudobolesia*, *Calc.*, *Drosera*, *Ignatia*, *Mercurius*, *Natrum mur.*, *Lycop.* For feeble sight, *Anacardium*, *China*, *Cin.* For short sightedness, *Conium*, *Lycopodium*, *Nitric acid*. Far sightedness, *Con.*, *Hyoscyamus*. For other particulars, different remedies are applicable.

### HEADACHE.

Headache may be general or confined to a single part of the head, and not unfrequently arises from varied disordered conditions. There are indeed so many varieties of the disorder arising from such a multiplicity of causes, and symptomatic of many different morbid conditions, that a perfect knowledge of the pathological condition of the system attending it, is impossible; and therefore the only guide in treatment must be the symptoms. We may, however, derive much aid in the treatment, when either the remote or proximate cause is apparent.

CAUSES.—As before remarked, the causes are various. Headache may be an attendant on febrile diseases; it may result from debauch, fatigue, nervous excitability, constitutional infirmity, indigestion, improper or unsuitable articles of diet and almost any other disturbing agency.

TREATMENT.—The principal remedies employed in the treatment of the different varieties of the disorder, are *Aconite*, *Arnica*, *Arsenicum*, *Belladonna*, *Bryonia*, *Chamomilla*, *China*, *Coffea*, *Digitalis*, *Dulcamara*, *Ferrum*, *Graphites*, *Hyoscyamus*, *Kreosotum*, *Lachesis*, *Mercurius*, *Nux vom.*, *Natrum mur.*, *Opium*, *Pulsatilla*, *Rhus tox.*, *Sepia*, *Sulphur*, *Veratrum*, *Zincum*, &c., &c. An analysis of the remedies to meet the various symptoms and conditions, requires minute observation.

When headache arises from taking cold, *Aconite*, *Bell.*, *Nux vomica*, especially if there is fever, pain in the back and limbs.

Headache in the afternoon, *Bell.*, *Lycopodium*.

Headache in the cold air, *Coffea*, *Ferrum*; in the open air, *Calc.*, *Caust.*, *Chin.*; in warm air, *Iodium*.

When there is a sensation as if the head would split, *Aconite*;

when arising from a fit of anger, *Nux vom.*, or with getting angry, *Dulcamara*; when attended with apprehension, Fluoric acid.

Headache arising from disorder of the bowels, *Graphites, Plumbeum.*

- " ascending from the nape of the neck, *Sanguinaria*.
- " relieved by falling asleep, *Anacardium*.
- " extending down the back, *Natrum mur., Phos., Puls.*
- " with backache, *Sabina, Veratrum*.
- " as if the brain were pressed together, *Arnica*.
- " as from a band around the head, *Merc., Stann.*
- " in arthritic persons, *Bell., Colocynth, Nux vom.*
- " from bending forward, *Spigelia, Staphysagria*.
- " with bloated feeling, *Bell.*
- " arising from loss of blood, *Chin., Coccus*.
- " in the bones of the head, *Aurum, Mercurius, Sulphur*.
- " with desire to bury the head in the pillow, *Bell., Hyos.*
- " arising from debauch, *China, Nux vom., Lachesis*.
- " caused by chagrin, *Bryon., Cham., Ignatia*.
- " with sensation of burning, *Mercurius*.
- " with chilliness, *Lachesis, Nitric acid*.
- " during paroxysms of coughing, *Nux vom.*
- " continuing day and night, *Rhus tox.*
- " from drinking coffee, *Cham., Ignat., Nux vom.*
- " as if it would fly to pieces, *Bell., Bry., Merc., Sil., Subp.*
- " from mental exertion, *Aurum, Calc., China, Nux vom.*
- " abating in the evening, *Natrum mur.*
- " with sensation of hammering, *Ferrum*.
- " caused by grief or fright, *Ignatia, Phos. ac., Opium*.

When headache is attended with fever, and in the forehead with heat in the head and heaviness, *Aeonite*.

If produced from fatigue, brought on from over exertion, *Arnica*.

If produced by alcoholic drinks, attended with derangement and burning in the epigastrium, *Arsenicum*.

If confined to the forehead, as if there is hyperæmia, and pain as if the head would split or fly to pieces, pain in the orbits, with closing of the eyes, *Belladonna*; and also where there is hemicrania, *Belladonna*. If attendant on severe gastric derangement in rheumatic patients, great fulness and heaviness of the head, with digging pressure in the direction of the forehead and when the headache is worse when moving about, *Bryonia*.

When there is headache during sleep, or early in the morning on waking, as if the head would fly to pieces, or rush of blood to the head with beating in the brain, *Cham.*

When there is headache from suppressed catarrh, or bruised sensation of the brain, with sleeplessness—headache as though the head would fly to pieces, with heat and fulness of the head, at night, or worse in the open air, or aggravated by contact, and especially if the headache supervenes upon the loss of blood or diarrhoea, *China*, and also if the roots of the hair are sensitive to contact and a general soreness of the integuments of the head, *China*.

For headache, attended with excessive painfulness and irritability of the body and mind, aversion to the open air, or arising from intoxication on wine, or from excessive emotions, or supervening upon an attack of measles, or for hemicrania as from a nail in the parietal bone, *Coffea*.

For attacks of pressure in the forepart of the head during mental exertion, stitches in the temples and forehead externally, vertigo, with trembling, *Digitalis*.

When there is internal uneasiness, dry heat and burning in the skin, or fever after a cold, attended with stupifying headache, confined only to some spots. The occiput feels enlarged or when attended with rush of blood to the head with humming in the ears and hard of hearing, the headache aggravated by motion and talking, *Dulcamara*.

For headache on the vertex with a painful pressure when in the cool, open air, and the eyes red with burning and the scalp is painful, *Ferrum*.

For headache confined to the occiput, chronic dryness of the skin; pressure in the eyes, oppressive constriction and tension in the occiput, *Graphites*.

In headache, as if from concussion of the brain, stupifying, attended with spasmodic closing of the lids, or double vision, or headache arising from inflammation of the meninges, *Hydrocephalus*, and a shaking of the head to and fro, *Hyoscyamus*.

For headache in rheumatic or scrofulous patients, attended with weak memory, tearing day and night with flushed heat in the face, sleeplessness and throbbing in the forehead, *Kreosotum*.

When the headache arises from exposure to the sun, or abuse of mercury, or from intoxication, attended with nausea, or when coupled with nausea, *Lachesis*.

For tearing, burning headache, burning and smarting of the eyes,  
*Mercurius.*

If the head becomes painful early in the morning or after eating, increased by motion or bending forwards, attended with nausea, and especially in drunkards, *Nux vom.*

For headache and weak memory, attended with heaviness of the head, and painful, as if it would fly to pieces, or as if compressed, especially during mental exertion, *Natrum mur.*

Headache produced by congestion of blood to the head with violent throbbing in the same, or headache aggravated by moving the eyes, or like oppressive tightness of the whole head, *Opium.*

Headache caused by the abuse of mercury, a cold, or by derangement of the stomach in consequence of eating fat, or pain upon one side of the head with nausea and vomiting, and pain as if the brain would be torn, or from rush of blood to the head, with stinging beating in the brain, when stooping or studying, and headache after lying down in the evening or early in the morning, *Pulsatilla.*

Headache immediately after eating or after drinking beer, or when moving the arms, throbbing in the occiput, painful tingling in the head, or oppressive fulness and heaviness, as if the brain would issue through the forehead on stooping, *Rhus tox.*

For morning headache, weak memory, dulness of the head and hemicrania with nausea, and vomiting; semilateral headache, after lying down preceded by weight in the head; beating headache, especially in the occiput, or when occasioned by rush of blood to the head, with heat in the head when stooping, pressure in the eyeballs and especially if attended with depression of spirits or sadness and even anxiety, *Sepia.*

Headache nightly, with feeling of fulness and weight in the head, especially in the occiput, and also if attended with weak memory or melancholy, or vertigo when sitting, or early in the morning, or coldness of the outer head or irritable drowsiness in the after part of the day and a good deal of chilliness at night, *Sulphur.*

For hemicrania with nausea and vomiting, or with painful stiffness in the nape of the neck, or with enuresis or oppressive headache with pain in the stomach, considerable tendency of blood to the head, cold sweat upon the forehead, *Veratrum.*

At times an attack of hemicrania is preceded by deprivations of vision and audition and the stomach exhibits signs of derangement.

Headache attended with drawing in the occiput, vertigo and inclination to fall to the left side, pain in the forehead, temples and occiput, worse after dinner, oppressive headache early in the morning; in the forehead with dulness in the temples and occiput, and sometimes attended with pressure in the eyes, *Zincum*.

Headache being produced by so many disturbing agencies and being connected with so great a variety of conditions that a great variety of remedies will be required, and in all cases a careful adaptation of the remedy, according to the group of attendant symptoms, will be necessary.

*Diet and Regimen*.—When suffering from headache arising from any cause whatever, it is necessary to guard and protect the function of digestion by adhering strictly to a plain but nutritious diet, and moreover unless the disorder is attendant upon such conditions of the system as forbid it, the patient should frequently be supplied with a fresh invigorating atmosphere and should be restricted to regular habits, in eating, drinking, sleeping, &c.

#### SICK HEADACHE.

Ordinary sick headache is characterized by rending pain at the top of the head, with violent retching and vomiting. It appears to be essentially nervous, inasmuch as the circulation does not appear to be affected.

*CAUSES*.—Sick headache appears to be a constitutional infirmity with many, and comes on at irregular periods from trivial exciting causes; sometimes an attack is brought on by looking at any dazzling object, by too tight ligatures about the head, or by a comb pressing powerfully upon it. Hemicrania, which is one of the forms of sick headache, is not unfrequently attended with hysteria and is peculiar to hysterical individuals, and on this account it is sometimes termed *Hysteric* or *Hysteric nail*, from the sensation having been compared to that of a nail driven into the scalp.

*Hemicrania* in many cases returns periodically, like the paroxysms of an intermittent fever; by some it is regarded a form of neuralgia. Piorry regards it neuralgia of the iris, because fatigue of the eye brings on the difficulty, and operations upon the eye will produce vomiting, the same as in hemicrania; as the difficulty is common to all ages, it is believed to be hereditary, or that a decided predisposition may be laid in the organization.

by the presence of nausea and vomiting of an acid matter. At other times the attack comes on without any preceding premonitions, and is excessively severe, being confined to one side of the head, affecting more especially the forehead and temples. Although during an attack there is no encephalitis; the encephalon, nevertheless, is quite sensitive to light and sound and even the skin of the parts affected is unable to bear the slightest touch. The intellect is rarely disturbed, though strange perversions of the senses are occasionally witnessed. In most cases the stomach is disordered, but the circulation remains in a normal condition.

During a severe attack there is profuse lacrymation upon the side affected, and sometimes the secretory organs are so much deranged by the attack as to occasion jaundice. The duration of the paroxysms vary from two to four or six hours. The periods of their occurrence are very irregular, sometimes only once a year, at other times every week or two weeks.

TREATMENT.—The remedies for the most part employed in the treatment of sick headache, are *Bell.*, *Bry.*, *Cham.*, *Calc.*, *Ignatia*, *Nux vom.*, *Pulsatilla*, *Iris versicolor*, *Sepia*, *Sulphur*. Those which are the most applicable in hemicrania, are *Bryonia*, *Calcarea*, *Graphites*, *Mercurius*, *Spigelia*, &c.

*Belladonna* will be applicable to those cases that are marked by severe rending pain in the vertex and forehead, attended with severe vomiting, and also in hemicrania where the pain is confined to a single spot, and affecting the eye, and attended with nausea and vomiting.

*Bryonia* is suited to those paroxysms where there is vomiting of bilious matters, aggravated by motion, and also in hysterical headache or hemicrania, attended with vomiting and lying down.

*Chamomilla*, when there is hemicrania in children, attended with vomiting of greenish bile, and general restlessness of the whole system.

*Calcarea carb.*, when the hemicrania is simply attended with eructations and inclination to vomit, icy coldness about the head, especially on the right side.

*Ignatia*, when there is headache as from a nail driven into the brain, with inclination to vomit, lessened by bending the head forwards, and when there is hemicrania, aggravated by stooping, coffee, noise and odours.

*Nux vomica* is suitable when there is pain and fulness of the head, and nausea in the after part of the day, and also in hemicrania, with nausea and sour vomiting, and when worse, in stormy weather.

*Graphites*, when there is hemicrania, with nausea and sour vomiting, worse when moving the head, as when riding in a carriage.

*Cocculus*, when there is inclination to vomit, and bruised feeling in the bowels, and convulsive trembling of the head, pressure and bruised pain in the eyes, headache and vomiting resembling seasickness.

*Mercurius viv.*, when there is violent, rending headache, as if the head would fly to pieces, and bitter vomiting, resulting in jaundice, and when the pain is aggravated by warmth in the bed, tearing headache on one side, and also tearing, burning headache, and bitter vomiting, especially when the pain is confined to the temples, very suitable for persons of pale complexion, jaundiced hue of the skin, with dim, dark-looking eyes.

*Pulsatilla*, when there is sick headache, in persons of mild disposition and lymphatic temperament, hemicrania with nausea and vomiting, semilateral headache and nausea, at or near the menstrual period, aggravated by lying down, or when the headache has been caused by the abuse of mercury, or previous derangement of the stomach, and when it is especially worse in the evening, and when there is sweat on the hairy scalp and in the face.

*Iris vers.*, when there is semilateral headache, and severe beating in the head, and an irritable condition of the stomach and bowels; frequent nausea, retching and vomiting.

*Spigelia*.—Headache and vomiting, aggravated by the least exercise; boring and digging, tearing headache, during motion; shocks in the head and bilious vomiting, or nausea and retching; burning pain at the forehead and temples, as far as the eyes; pain in the orbits; pressure on the eyeballs, especially when turning the eyes, and when there is vertigo and nausea.

*Sepia* is one of the best remedies for sick headache in the morning, or semilateral headache in the evening; dulness of the head; hemicrania, with nausea and vomiting, and stinging and boring pains; beating headache, with nausea and eructations; headache, with deathly sickness, and pressure upon the top of the head; pressure in the eyeballs. This remedy is especially suited to those of pale face, with blue margins around the eyes, or yellow or sallow com-

plexion, having the appearance of jaundice, and especially when headache is attended with eructations, mostly sour, or bitter, or foul, or tasting of the ingesta after breakfast. It is suitable for hysterical females suffering from uterine weakness, and prone to paroxysms of sick headache.

*Sulphur* is one of the most efficient remedies in sick headache, when there is a feeling of fulness and weight in the head, or when the pains are so violent as to cause fainting fits or hysterical spasms, and especially when the pain is most felt when the body is at rest; and also when there is chronic headache, and occasional nausea, and a throbbing headache, mostly with heat in the head; or stitching headache, especially in the forehead; and also when the paroxysm is succeeded by yellowness of the skin and sclerotica; and when the headache is worse in the open air; and finally, when the paroxysms are characterized by coldness of the forehead and the scalp.

When sick headache frequently affects those who are suffering from prolapsus uteri, sulphur may be employed first, and followed by sepia, if in feeble constitutions; or it may be followed by Belladonna in robust or plethoric females.

*Platina* will be found a successful remedy when the headache comes on, gradually increasing and then decreasing, with a numb feeling in the head, and on the vertex; and when there are pains in the sides of the head, as from a plug; or when there is compressive pain in the forehead and temples, roaring in the head; and when there is a cold feeling in the eyes, objects seem smaller than they are; and also when there are burning and redness of the face, burnt feeling on the tongue; and especially when the headache supervenes upon protracted menstruation; or when there is debility of the menses, attended with short breath, constrictive oppression of the chest and palpitation of the heart; and when, during the headache, there is constrictive pain in the pit of the stomach.

*Aurum* is also a remedy, especially suited to females when there is burning in the forehead; cold feeling on the top of the head, and beating in the left side of the forehead, and when there are sadness and weeping, and inclination to suicide; or when the sick headache attends a prostrating leucorrhœa, and is preceded by palpitation, pulling and cutting pain in the region of the heart, and when there is burning and stinging in the palmar and plantar surfaces.

*Arsenicum* will be found a useful remedy, when there is beating pain in the forehead, with inclination to vomit, and in hemicrania, when there is burning, tearing pains in one side of the head, and acrid vomitings and intense thirst.

Many other remedies may be consulted with reference to the cure of this inveterate lesion.

Sometimes cold applications to the head during a severe attack may be permitted, such as cloths, dipped in cold water, and perhaps too, when there is any indication of hyperæmia, tepid water, or that which is quite warm may be applied in the same way.

The *diet* and *regimen* for persons addicted to sick headache, should be restricted, they should refrain from the use of stimulants entirely, such as coffee, green tea, wine, ale, or aleoholic drinks, and from all fat or greasy food; plain toast and black tea; bran bread, mutton and beef, with a sparse quantity of the vegetable aliments, should chiefly constitute the diet, and when practicable, exercise in the open air is commended.

To relieve suffering is the aim and design of the physician, and no common ailment, whether of body or mind, can fail of requiring his strictest attention, and in the treatment of a malady so commonly prevalent as *headache*, but little advantage will be realized from the treatment unless certain rules and regulations are strictly adhered to. It is for the medical practitioner to point out these rules and require strict attention to them. In order that a clear idea may be had of what is meant by strict attention to certain rules, the following may be specified:—

1. If headache seems to be dependent upon difficult digestion, the greatest regularity should be observed in relation to the meals. The most nutritious and digestible aliments should be used, and great care should be exercised to masticate every particle before taken into the stomach.

2. The quantity of food should be restricted to what the digestive organs can take care of, without being burthened, and none but light food should be taken to retire to rest upon.

3. If any of the allowed aliments are ascertained to be the cause of bringing on a paroxysm, or of producing any aggravations, such articles should be prohibited.

4. If any known practice appears to produce headache, let it be discontinued, if possible. Sometimes a person's labor or employ-

ment may disagree with his health, as indicated by continual headache when in the discharge of his duties, of course, a change of employment is recommended when it is practicable.

5. If headache arises from drinking wine, ale, beer or any other stimulating beverage, abstinence from the use of these articles should be an imperative rule.

6. Should headache succeed the too free use of tobacco or coffee, tea, or any other stimulant, abstinence from their use until the health becomes established, should be regarded an imperative rule.

7. When persons appear to suffer from constitutional sick headache, it is the duty of the practitioner to seek out the most favorable measures for affecting a change in the system, that it may obviate the suffering—as for instance: all irregularities should be guarded against, such as in eating, drinking, exposure, sleeping, &c.

8. In prescribing remedies, the practitioner should first study his case well and be critical in the selection of his remedy, and then he should persevere in the treatment, allowing of no derelictions on the part of the patient, until the effect has been satisfactory, and in this way a change may be effected in the system, and the headache may be effectually cured, and on the contrary, any relaxation on the part of the patient will only retard the efforts of his physician, for no constitutional changes can be effected without a persistent change of regimen.

Headaches of a mild character, and when the subjects are able to keep about, may often be mitigated by gentle exercise in the open air, and particularly if they are purely nervous in their character, and not dependent upon febrile difficulties; but the exercise should be regular and not violent, for in feeble constitutions nothing is better calculated to produce headache than a degree of exertion beyond the patient's power of endurance. Many females when they go into the streets to walk, are led by a fond of novelty and change to prolong their exercise to a degree that defeats the legitimate object for which it is intended. In all such cases the practitioner should be critical in prescribing proper restrictions, and particularly when headache is dependent on other chronic lesions, easily aggravated by over-exertion. Headaches attended with fever require rest in healthy apartments, free from an adulterated atmosphere, or sickening odors of any kind.

## ECLAMPSIA.

UNDER this head is included the epileptiform convulsions of children which occur during dentition: 2d, Those that occur during gestation, or during parturition:—

1. *Convulsions of children.*

Prior to two years of age, it is quite common for children to be affected with this difficulty—for the infantile frame, during this period, is extremely impressible, and any exciting cause, such as the irritation arising from dentition, may readily occasion convulsions.

**SYMPTOMS.**—Sometimes without any apparent dulness or any previous indication, these convulsions may take place; but more commonly, the child will show signs of indisposition for a longer or shorter period previous, and then the child falls suddenly down in a state of insensibility, agitated with convulsions, twitchings of the muscles of the face, and those of the upper and lower extremities; the eyes are turned up, the face becomes livid, and there is at times, slight foaming at the mouth, though seldom.

The unconscious state varies in its duration; when the paroxysm is slight, it may continue but a few minutes, but generally the duration is longer, and the child gradually recovers its consciousness, though sometimes it remains dull and lethargic for hours. The first paroxysm rarely terminates fatally, but the pathological condition of the system may be such that fit will follow fit until death relieves the little sufferer. Our bills of mortality show, that a large proportion of infants fall victims to this difficulty.

**CAUSES.**—There exists, undoubtedly, in some children, a peculiarity of constitution that predisposes them to the disease. This peculiarity may be hereditary, or, it may arise from some congenital debility. *Andral* mentions an instance of a family of five children, all dying with convulsions, where the antecedents of the family had never known anything of the difficulty. But as the nervous system is unusually impressible, under the age of two years, it is not difficult to trace the disease to some irritation, either intestinal or from dentition, that may in most cases be the cause of the

difficulty. It has been observed, that children having a prominently developed cerebrum, are more subject to convulsions than others; and this is, probably the case; for this development would seem to indicate a fully developed nervous system, and, of course, more susceptible to impressions or shocks from irritation, than those less developed. When very young children are observed to be unusually precocious, with tendency to blush or turn pale suddenly, and under the influence of the most trifling causes, there is reason for exercising undue care with them, for such may be regarded exceedingly liable to convulsions.

Dentition is the most frequent cause of convulsions in children—the irritation produced in the nerves distributed to the gums, being propagated to the nervous centres, and reflected to the muscles, which are thrown into convulsions. Indigestible food in the stomach of a child, may also prove an exciting cause of this difficulty, and even food perfectly digestible, in too large quantities, may have a similar effect, particularly where there is a predisposition to the disease.

Intense mental emotion, such as fright or great terror and severe bodily pain may likewise be reckoned among the exciting causes. Fever will always affect some children in this way, probably on account of the hurried circulation which it occasions. A constitutional tendency to hyperæmia on the part of some children, occurring at certain seasons, during the first four or five years of life, proves the source of convulsions, which often excite the apprehension of parents as to the final result; but as the frame has acquired more vigor—becomes more developed, the difficulty as well as the tendency has disappeared.

Most children that die of convulsions, afford no evidence from autopsy, of disorganization of the brain, at least so far as examination has been made.

TREATMENT.—A disease exhibiting so much of an alarming character, requires decisive and very prudent treatment. If there is just grounds for suspecting the cause, the treatment, of course, will be with reference thereto. The resort to the warm bath at first when the convulsion has made its appearance, may in a majority of cases be commended; but its effects are only palliative and should be followed up by the administration of well chosen remedial agents.

The remedies that have proved the most effectual in the treatment of convulsions in children are, *Belladonna*, *Cantharis*, *Causticum*, *Chamomilla*, *Cina*, *Ignatia*, *Nux Moschata*, *Nux Vomica*, *Phosphorus*, *Platina*, *Stramonium*, *Sulphur*, &c.

In children of obstinate disposition, given to crying and howling as from rage, who manifest anguish and restlessness before the spasm, and who have convulsive motions and spasms of single limbs, and of the whole body, and who appear to have considerable heat in the head, flushed face, wild and wandering looks, or half-open, protruding, or staring eyes,—*Belladonna*.

In some cases, where children from the irritation of teething, become troubled with urinary difficulties,—especially such as are of yellow complexion, or pale face, with tendency to erysipelatous eruptions upon the cheeks—and when the body appears to be exceedingly sensitive all over,—and when the spasm appears to come on from strangury,—*Cantharis*.

For children of unsteady gait, and constantly liable to fall down, who are full of fear at night, and liable to spasms from irritation of the stomach, either from over-eating or from indigestible food, and in children of large abdomen and habitual or chronic constipation, involuntary emission of urine, with numbness of single parts, contraction of single limbs, convulsive motions and twitchings,—*Causticum*.

For the most part, when spasms in children arise from the irritation of teething, affecting both the internal and external organs—especially when the child lies insensible changing its color frequently, with cough, rattling, yawning and stretching; or, when the spasm seems to come on violently in children, or new born infants, and especially when there has preceded the spasm a feverish condition of the system—very restless—moaning and tossing about; and also, if in new-born infants the spasm has been preceded by violent crying, or if after, they lie in sopor, or half sleep,—*Chamomilla*. Another indication for the use of Chamomilla is screaming, starting and tossing about during sleep. This remedy seems to be particularly adapted to children, when the whole nervous system is very irritable and sensitive, predisposing them to spasms or convulsions. Frequent fevers and bowel complaints often deteriorate the feeble frame of infants during dentition, so as to bring about an excessive ner-

vous irritability,—Chamomilla has been found one of the most useful and effective remedies to meet these conditions.

When the spasm appears to be general, twisting the head and trunk in every direction, with striking about of the limbs—occasional violent jerks through the whole body, more particularly perceived in the hand and epigastric region, with stamping of the feet, jerking of the head upwards and backwards, and particularly if the child has manifested any symptoms of a vermicular affection—*Cina*.

*Ignatia* may be employed to cure children of eclamsia, when the spasms come on from teething, fright, or mortification.

*Nux Moschata* is a valuable remedy for eclamsia in children—better suited to those of feeble constitution and scrofulous diathesis, frequently troubled with Diarrhoea from debility,—and violent palpitation of the heart.

*Nux Vomica* seems best suited when the eclamsia has been brought on by cold or indigestion. When eclamsia appears to set in when the weather changes, in children afflicted with great nervous debility and contraction of single limbs, and especially when there is tendency to rush of blood to the head, or the patient is suffering from some gastric complaints, *Phosphorus* may prove an efficient remedy.

*Platina* will be found a valuable remedy in cases of extreme debility, where the eclamsia does not appear to result from any local irritation, but from general debility and prostration of the nervous system.

*Stramonium* has been administered with great apparent benefit, in eclamsia, especially if there has been any suppression of cutaneous eruption, or when the spasm has been brought on by fright.

*Sulphur* is a remedy often called into requisition for children of strongly marked psoric constitutions, and in many attacks of eclamsia, where other remedies appear to be indicated, a single dose of sulphur may prove of service.

There are other remedies, such as *Aconite*, *Arnica*, *Mercurius*, *Pulsatilla*, *Veratrum*, &c., that may be consulted in the treatment of eclamsia in children.

**DIET.**—It is requisite that the digestive organs should be guarded with great care; and when parents are aware that their children are predisposed, or are habitually inclined to eclamsia, the physician should enjoin upon them the duty of withholding all sweet meats—such as preserves, candies, &c., &c., and all substances of

difficult digestion. The food should be of a pultaceous character—such as will sufficiently nourish the child without being a severe tax upon the digestive organs.

## 2. ECLAMSIA IN PREGNANT AND PARTURIENT FEMALES.

Females either in the pregnant or parturient state may be attacked with convulsions decidedly of a hysterical character—but those most frequently met with in these conditions are epileptiform. The average number of females thus affected is not great; according to Churchill and others, not more than one in six hundred.

**SYMPOTMS.**—The symptoms that usually characterize convulsions at the latter period of utero-gestation, and during parturition, are, with the exception of the *aura epileptica*, essentially those of epilepsy. It is also observed that similar premonitory symptoms in other respects are witnessed. In the convulsions, however, that occur during the latter period of gestation, and during parturition, there is evidence of a greater vascular hyperæmia, as indicated by the tumefaction of the face and the injection of the blood-vessels of the tunica conjunctiva. Sometimes an intense pain in the forehead has been described as an important premonitory symptom—and also a severe pain in the stomach. The difficulty, however, sometimes comes on without warning—the pupils become dilated, the face tumid, the conjunctiva injected—and the patient temporarily convulsed; the respiration at first is irregular, the teeth being closed, the respiration forming the frothy secretion is at first hissing, but afterwards almost suspended. The paroxysms are usually short, lasting only a few minutes,—the convulsions exhibiting less and less violence, gradually subside, and at variable periods after, the disordered movements cease, and the patient becomes quiet; but usually with a pulse much accelerated. Frequently consciousness is entirely restored, leaving the patient with headache and great debility. But in more unfavorable cases, the consciousness is not restored, and the confused condition of the intellect remains apparent. In other cases there is total insensibility, with stertorous respiration.

It has been observed, that there is usually a return of the convulsions after an uncertain interval, and then will succeed another interval. This alternation may take place several times in the course of twenty-four hours.

When convalescence is the result, recovery may take place very gradually; the patient remaining in a state of coma for some time, and when there has been considerable modification of the functions of the encephalon, the patient may continue deaf, or blind, and even motionless and speechless.

In some cases of a fatal termination, the patient may lie in a comatose state for some time, and ultimately sink away and die, with an exhibition of symptoms greatly resembling those of apoplexy.

In some cases the disease manifests a fatal character from the very onset, and the patients never speak or show the most obscure indications of reason or sensation. They apparently sink at once into an apoplectic sleep and die.

Those cases of convulsion occurring during labor, are apt to engender abdominal inflammation, if not carefully guarded against by the practitioner.

Puerperal convulsions are always regarded of an exceedingly dangerous character. Dr. Churchill collected statistics that would go to prove that about one in every four cases proves fatal; and even when the patient recovers, there is no assurance seemingly, that she will not be more liable to similar attacks in her after pregnancies.

**CAUSES.**—It would seem from facts elicited by observation, that the causes are not always apparent. The seat of the irritation may be in the uterus, stomach, or bowels, from whence it acts upon the great nervous centres, producing the convulsions. It has been ascribed to mental emotions—rush of blood to the encephalon during uterine contractions—to the use of stimulants during pregnancy, and at the time of parturition—and by some, the cause is assigned to atmospheric influence, but in a majority of instances the causes are obscure. Post mortem appearances of the encephalon seldom disclose anything to rely upon as the cause, though in some instances the vessels have been turgid with blood, and in others serum has been found effused in the ventricles, or in the cavity of the arachnoid.

**TREATMENT.**—For the homœopathic treatment of eclampsia in pregnant and parturient females, the following group of remedies may be consulted: *Argentum, Belladonna, Cantharides, Causticum, Chamomilla, Cicuta, Helleborus Niger, Ignatia, Nux Moschata, Nux Vomica, Phosphorus, Platina, Stramonium and Sulphur.*

In epileptiform attacks, during pregnancy, when the patient has complained of pains as if bruised, especially in the small of the back and the joints of the lower extremities, raw and sore pains of the internal organs; and when the patient is subject to anxiety and lowness of spirits, vertigo, with obscuration of sight, pain in the occiput, stupifying pressure in the fore part of the head, paroxysms of compression in the brain with inclination to vomit, and burning in the pit of the stomach when standing, bleeding of the nose, heartburn, &c.,—*Argentum*.

When the spasmodic attacks are attended with stiffness of the whole body in highly excitable temperaments, and particularly if the spasms occur during parturition, and the patient has clenched hands, or, when the attack appears to rise from rush of blood to the head,—*Belladonna*.

When the patient is faint, weak, and excessively sensitive all over, with trembling desire to lie down, and is threatened with convulsions, or even if convulsions do occur during pregnancy, and especially if there is retention of urine, or spasmodic pains in the bladder before the attack, and there has been a complete loss of appetite and aversion to food, and burning eructations, increased by drinking, or when there has been any inflammation of the kidneys,—*Cantharides* may be consulted.

*Causticum* may be employed with advantage when there is convulsive motions and twitchings, and spasm—and when coffee appears to aggravate the sufferings, and when there is an intolerable restlessness of the whole body; and when the patient is melancholy and disposed to weep,—full of fear at night, and complains of stitching pain in the temples, pressure in the eyes, roaring or buzzing reports in the head, and particularly in the ears.

*Chamomilla* is one of the best remedies that can be called into requisition, for spasms in pregnant or lying in females, subject to debility and nervous restlessness; it will be found unusually applicable to the various ailments of females, during the delicate period of gestation, and also during parturition.

*Cicuta* has been regarded a useful remedy for spasmodic pains of various kinds during pregnancy and parturition. It has been successfully employed when the patient has been attacked with general convulsions, and also, when the patient has complained of jerks through the head, arms and lower limbs, resembling electric shocks.

*Helleborus Niger* may be consulted when the patient manifests an œdematos condition of the lower extremities, and great debility and convulsions supervene, and a convulsive movement of the muscles; and also when the patient manifests a silent melancholy, or excesssive anguish as if she would die.

*Ignatia* for confused feeling in the head with sensation of suffocation, convulsions, spasmodic and compressive pains.

*Nux Moschata*, when the patient is subject to fainting fits, hysterical paroxysms and convulsions, either during pregnancy or parturition—and particularly if she manifests excessive languor, either in the knees or small of the back, and drowsiness before or after the spasms.

*Nux Vomica*, when there is gastric and biliary derangement and congestions, and tendency to convulsions ; convulsions or spasms followed by paralytic weakness. This remedy is the most suitable for females of sanguine or choleric temperaments, subject to much nervous irritability, and rushes of blood to the head.

*Phosphorus* may be found useful, when there is a complication of chest affections, and a tendency to catarrhal fevers and lung complaints. This remedy is for the most part to be consulted as an adjunct to those well suited to spasmodic difficulties, when the symptoms that indicate its use are present.

*Platina* is especially suitable for females, subject to frequent trembling and palpitation of the heart—excessive debility and uterine weakness, attended with spasms without loss of consciousness,—and also, when there is mental derangement after a convolution, and when there is involuntary weeping and extreme anguish about the heart, with fear of approaching death, or general lowness of spirits.

*Stramonium*, when there is trembling of the limbs during labor, and convulsions with loss of consciousness.

*Sulphur*, when there is some impairment of the senses, such as deafness, loss of sight ; and also, when the memory is impaired, after the patient has suffered from convulsions.

It has been suggested that females, suffering from eclampsia during pregnancy, should be as exempt from irritations of every kind as possible, and in a darkened room away from noise ; and that they should not be allowed the free use of watery drinks, and but little food of any kind.

## EPILEPSY.

This disease has a striking resemblance to eclampsia; it manifests itself in paroxysms, sometimes periodically, but generally at irregular periods.

SYMPTOMS.—The premonitory symptoms are usually such as foretell nervous affections in general. One or more of the senses may be depraved; flashes of light or dark spots before the eyes—tinnitus aurium, vertigo, confusion, or slight mental aberration, headache, numbness of some part of the body, as a finger or toe; a disagreeable itching or formication; palpitation, or irregularity in the action of the heart, with violent pains in the chest; vomiting occasionally. Most writers have described a peculiar sensation, denominated, the aura-epileptica, as a premonitory symptom. It is said to be a sensation originating in the extremities, as if the air were passing upwards to the heart or brain, and when it reaches either of these centres of vital action, the patient immediately falls—deprived of consciousness—and the paroxysm commences.

But whether there has been any precursive symptoms or not, the epileptic falls suddenly—sometimes uttering a distressing cry—deprived of all sensation, volition, or mental manifestation of any kind. Sometimes the patient will moan when the attack comes on; at other times he will run or jump, and move about rapidly before he falls.

French writers distinguish this disease into three varieties.

1st, *Grand Mal*, when the patient falls in perfect epilepsy.

2d, *Petit Mal*, when there is vertigo, confusion and partial convulsions.

3d, *Absence*, when there is no convulsion, but simply loss of sensation and intelligence.

It would seem, however, that this distinction depends entirely upon the severity of the symptoms.

When the symptoms are severe, the face appears tumefied and livid; the eyes turned up and fixed; the pupils dilated or contracted, and immovable; the jaws are so firmly brought together as sometimes to injure the tongue. The convulsions are for the most part general, affecting all the voluntary muscles, though sometimes those of one side are more affected than those of the other. The inspiratory muscles likewise participate in the convulsions; the respira-

tion becomes hurried and laborious; short inspirations, frequent and loud. Sometimes the circulation does not appear to be affected, though generally it is much disturbed; at times the respiration seems temporarily arrested. The violence of the distortions does not usually last many minutes, before it begins to diminish. The redness of the face disappears, and the face becomes pale; perspiration begins to appear upon the surface, and the patient manifests great prostration; and generally devoid of consciousness, completely comatose, with loud respiration.

After an indefinite length of time, the patient begins to recover; still complaining of a confusion, lassitude, pains in the head and limbs, and ignorant of what has occurred except from the injuries he may have received during the paroxysm.

Sometimes a furious mania succeeds, which may last for several days. This has been termed mania epileptica, or epileptic delirium.

The paroxysms of epilepsy may sometimes occur only once in a year, but more frequently they occur as often as once a month, and sometimes every week; and, occasionally every day and even at shorter intervals. The more frequently they occur the less violent may be the symptoms; the paroxysms not being fully formed. Sometimes there is merely a loss of consciousness, or a slight exhibition of convulsions in the muscles of the face.

When the disease is confirmed, the attacks commonly come on during the night, shortly after the patient has gone to sleep; and he awakes in the morning with no knowledge of his having had an attack, except from the feelings of languor and lassitude with which he finds himself afflicted.

The horizontal position assumed on going to sleep, is supposed to facilitate the flow of blood to the head by the arteries, and thereby occasion the difficulty; but it seems quite as reasonable to suppose, that some modification of the nervous centres themselves during sleep, may favor the epileptic condition.

*Prognosis.*—In a majority of instances, epileptics have ultimately fallen into idiocy, but when the difficulty occurs prior to the age of puberty, it may terminate in health. The evolution that takes place at this period in the system may change the morbid condition, and the disease may disappear under homœopathic treatment. Cures have been wrought at other and more advanced periods of life, but in many cases after a duration of years, other maladies supervene,

under which the patient sinks. Death seldom occurs during a paroxysm, unless it results from congestion of the brain, or from the severe depression which the violence of the disease has produced upon the system, rendering it totally unable to rally.

CAUSES.—Young persons are more subject to epilepsy than adults and females, more than males, from which it might seem that feebleness or delicacy of the constitution may render the system more liable to the disease. It is maintained by some that epilepsy is a hereditary disease, but there are doubts of this being true; although in some instances, perhaps, the disease may be hereditarily transmitted.

When there is great mobility and irritability of the nervous system, atmospheric heat may develop the disease.

Among the exciting causes may be reckoned, mental application and emotion, frights, tickling the soles of the feet or sides of children, has been known to bring on the disease; overpowering odors, venereal excesses, great fatigue, vermicular affections, and reper- cussed eruptions, are also classed among the exciting causes.

*Meyer* supposes that epilepsy may be epidemic in schools of young misses, who have not attained the age of puberty. One being attacked, he asserts, was followed by the same difficulty in others, who were of highly excitable temperaments. Some have supposed that the condition of the moon may exert some influence of the kind, but this superstitious notion is entirely wanting in confirmation.

Disorders of the intestinal canal are common exciting causes; paroxysms frequently occur after aliment of an improper character has been taken into the stomach.

*Marshall Hall* supposed all convulsive diseases to be affections of the true *medulla spinalis*, and he ranks epilepsy among the centric convulsions, which may be induced by any disease within the spine.

Post mortem researches have disclosed no anatomical characteristics peculiar to epilepsy; although the inference is, that some inappreciable modification of the nervous centres may occasion the disease.

TREATMENT.—During the paroxysm much cannot be done, it must have its course; but when there are premonitory symptoms, well chosen remedies may ward off, or materially lighten the attack. The disease is by no means to be regarded as incurable, when it

occurs previous to the age of puberty, nor yet when it arises as a sympathetic affection.

Its occurrence after the age of puberty, as a constitutional or hereditary infirmity, forbids the hope of a speedy cure. It having been of long duration, would argue that it is difficult to bring about a cure. Treatment, however, under the most discouraging circumstances, may prove useful in lengthening the intervals between the attacks, and also in mitigating the violence of the attacks when they occur.

The remedies generally found most useful in the treatment of the malady are, *Aconite*, *Arnica*, *Argentum Nitricum*, *Belladonna*, *Calcarea*, *Causticum*, *Cicuta*, *Cuprum*, *Hyoscyamus*, *Ignatia*, *Nux Vomica*, *Opium*, *Silicea*, *Stramonium* and *Sulphur*.

*Aconite*, when there is a full bounding pulse, in the commencement of an attack; and also, when the subject is of a plethoric habit, and of sanguine temperament, and particularly if there is feverish heat about the head, and vertigo.

*Arnica*, when before the attack there is a disposition to yawn, and the patient seems wearied and fatigued; and also, when the attack has been excited by a blow or fall. This remedy is also useful after the convulsion has passed off—when the patient feels sore and fatigued, with a sensation in the extremities, as if bruised.

*Argentum Nitricum*. This remedy has been used between the attacks, when the epilepsy has been complete; when there is a sensation as if the limbs would go to sleep, and when very weak and weary as if worn out and exhausted. It also may be administered during an epileptic attack when the convulsion is violent, producing a paralysis of the extremities; and when there is much tenacious mucus in the mouth, or else when there is a dry tongue; and particularly when the face exhibits a sunken pale or bluish appearance, and the patient looks sick and exhausted.

*Belladonna*. At the commencement of an attack, when there is a crawling and torpor in the upper extremities, jerking of the limbs, especially of the arms; convulsive movement of the face, eyes and mouth, rush of blood to the head with vertigo; bloatedness or redness of the face, or, on the other hand, paleness and coldness of the face, with shivering and dread of light, with fixed look of the eyes, dilated or contracted pupils; or when the eyes are convulsed, obstruction of the throat, rendering the patient unable to swallow;

foaming at the mouth, involuntary discharges from the bowels and of urine, oppression of the chest, and anxious respiration; great tendency to a recurrence of the fits from the most trivial excitement or contradiction, loss of consciousness; sleeplessness after the fit, great restlessness and tossing about, or lethargic sleep with grimaces and smiles, and waking with starts and cries.

*Calcarea*, when the fits occur in children of a scrofulous diathesis, or from suppressed eruptions, and the attack commences with severe headache, confined mostly to one side of the head or the occiput. This remedy may also be employed in the treatment of females, subject to attacks of sick headache, ending in epileptiform convulsions. It may be followed with *Pulsatilla* or *Belladonna*.

*Causticum*, when there are convulsive motions and twitchings, contractive or burning cardialgia, and epileptic spasms; and particularly when there is preceding the attack a violent headache from getting heated; spasmody tension of the brain, and oppressive headache and twitching of the upper lip, pressure and burning in the eyes, distension of the abdomen, and involuntary emission of urine, and constipation of the bowels.

*Cicuta*, when there is vertigo, as if the patient would fall, spasmody affections of various kinds, general convulsions and epilepsy in parturient or pregnant females. It is suited to females of pale faces, with cold extremities, subject to scurvy, suppurating eruptions upon the skin or hairy scalp, and in front and behind the ears; violent thirst, burning pressure at the stomach, and anxiety at the pit of the stomach, frequent thin stool, and frequent urging to urinate, jerking and twitching of the arms and fingers.

*Cuprum*, when the commencement of the fit is in the fingers and toes, or in the arms, or retraction of the thumbs; and when there is loss of consciousness and speech, salivation, sometimes of a frothy character, eyes and face red, when the fits occur at the menstrual period.

*Hyoscyamus*, when the face is bloated, and when there is a bluish color of the lips, foam at the mouth, prominent eyes, convulsive movement of certain limbs, or of the whole body, violent tossing about, retraction of the limbs, renewal of the fits in attempting to swallow the least portion of liquid, cries, *grinding* of the teeth, loss of consciousness, involuntary and unnoticed emission of the urine,

cerebral congestion, deep and lethargic sleep, with stertorous breathing.

*Ignatia*, when the attack is brought on by grief; convulsive movements of the limbs, eyes, muscles of the face and lips, throwing of the head; retraction of the thumbs, bluish or red face, or red on one cheek and paleness on the other, or redness and paleness alternately, frothing at the mouth, spasms in the throat and larynx, with threatening of suffocation, difficult deglutition, loss of consciousness; frequent yawning or drowsy sleep, great anxiety, and deep sighs between or before the attacks, daily paroxysms.

*Nux Vomica*, when there are shrieks, throwing back of the head, trembling or convulsive jerks of the limbs or muscles; renewal of the paroxysms after contradictions and disappointments, or from anger; unnoticed emission of urine and passing of faeces, sensation of numbness of the limbs, vomiting, profuse perspiration, costiveness, ill humor during the intervals between the paroxysms.

*Opium*, when the fits occur at night, or in the evening—throwing back of the head, or violent movement of the limbs, particularly the arms; loss of consciousness, clasped hands, and deep somnolency after the paroxysm or fit.

*Silicea*, in chronic epilepsy, may be useful after *Calcarea*, when the fits occur at night.

*Stramonium*, when there is throwing back of the head or convulsive motion of the limbs, and especially the upper portion of the body and the abdomen; haggard and pale face, stupid expression, bloated appearance of the countenance, red face, unconscious, insensible, and sometimes cries, screams, &c., &c., when the sight of brilliant objects, or contact brings on the fits. This remedy may be used after Aconite or Belladonna; or in alternation, with *Calcarea* or *Sulphur*.

*Sulphur*, when the aura epileptica is manifest, which is denoted by sensation, as if a mouse were crawling over the muscles.

When the patient is attacked, he should be placed in a horizontal position, and such precaution should be taken, as will obviate any injury that may result from the violence of the convulsive movements. It is always commendable to insert something between the jaws, to prevent the tongue from being bitten. If in males, the cravat should be loosened or removed, and the clothes also should be made loose about the chest. If in females, the lacings of stays

and corsets should be removed; cold water may be sprinkled over the face, especially when the breathing is much affected by a spasm of the muscles concerned in respiration.

**DIET AND REGIMEN.**—There are few things more pernicious than a resort to stimulants, for persons subject to epilepsy; for it is seldom that more can be effected by their use, than a mere temporary relief—while a positive injury is inflicted upon the depressed nerves—and an obstacle is thrown in the way of recuperation. The patient should be restricted to a plain diet, easy of digestion; food should be taken only in moderate quantities. A generous diet may be allowed to persons whose digestion is good, and whose systems are weak and exhausted, and require substantial nourishment; great care, however, should be exercised not to overload the stomach, and between the paroxysms, excesses of every kind should be avoided—and above all excessive exertion, that is likely to weary the whole system, and predispose it for an attack.

#### CHOREA.

This distressing disease, usually denominated *St. Vitus' Dance*, is unquestionably peculiar to the nervous system.

**SYMPOTMS.**—Irregular and uncontrollable movements of different muscles or portions of the body—and sometimes, though rarely, the whole of the body may be implicated. It has been noticed that the left half of the body is affected more frequently than the right. From which it would be inferred that the right hemisphere of the brain is implicated. The affection is not always so extensive, sometimes the muscular motions are limited to a certain part—as to the face, one arm, or to a single muscle. The motions are both strange and fantastical—as for instance, the most singular grimaces and contortions are witnessed, when limited to the face; stammering is also the result when the muscles concerned in articulation are affected. Sometimes the respiratory muscles and those of deglutition are involved in the difficulty—and it has been affirmed even, that the muscles of the alimentary canal and the bladder may be so implicated, as to cause an involuntary discharge of faeces and urine.

It is not usual for the mental faculties to be much impaired unless the disease persists for a long time; under such circumstances the individual may become fretful and capricious, and sometimes, though rarely, there may be some indications of idiocy.

Andral maintains that the nutritive functions are not impaired—but others have observed an unusual torpor of the digestive organs.

During sleep, the symptoms are less marked, and sometimes they appear to be entirely suspended. It has also been remarked that a fit of passion will frequently suspend the symptoms.

The disease seldom comes on without some precursory sign—although in some instances it comes on suddenly. The patient often betrays great irritability of temper, disordered digestion, palpitations of the heart and other nervous indications, as well as twitching of the muscles of the face, extremities, &c.

The duration of the affection is uncertain, sometimes it may last for a few days only, at other times it may continue for months, and even years, even to the end of life, unless some great evolution takes place in the system, as at the age of puberty; under such circumstances the disease may eventuate in health, though frequently it takes another form, such as epilepsy, &c. It is believed, from observation, that homoeopathic remedies may often exert a salutary influence in controlling the disease.

**CAUSES.**—The disease is common to childhood, and for this reason it may be regarded as one of the predisposing causes. It has been observed in the *Hôpital des Enfants* of Paris, that during a period of ten years, that one in two hundred of the children admitted become affected with *Chorea*, from which it may be inferred that the disease is not very common. Professor Reese of New York, is of the opinion that the disease in this country, from some cause, is more frequent than formerly. It prevails the most between the ages of six and fourteen.

Some writers have reckoned among the exciting causes that of masturbation; but as the disease usually occurs previous to the age of puberty, this idea appears to be erroneous. A greater number of females seem to be affected with the disease than males. According to the observation of *Rufz*, in the hospital before alluded to, there were three females to one male, similar observations have been made by other pathologists.

Some pathologists maintain, that a scrofulous diathesis is favourable for the development of the disease, and that it occurs more frequently in rickety children than others; but other authorities maintain, that there is no perceptible difference in the constitutions of those affected and those not affected.

It has not been satisfactorily determined by observation whether the constitution, temperament or complexion exert any influence whatever, either as a predisposing cause, or a protection against the disease.

The disease may be transmitted from the parent to the child.

Among the *exciting causes* we may enumerate powerful mental emotions, as fright, or rage, gastric difficulties, and intestinal disease.

As the disease rarely proves fatal, it is difficult to point out the specific pathological changes that may result from it, or that may occasion the peculiar symptoms;—consequently it is impossible to locate the seat of the disease or the nature of the affection; different writers have variously located the difficulty in some portions of the nervous centres; some maintain that both the brain and spinal marrow are implicated; others that the disease arises from a morbid condition of the base of the brain, and yet others that it arises from the medulla oblongata; but the majority of observers are not satisfied of their being any morbid appearances in any of the nervous centres, calculated to throw much light upon the pathology of the disease.

A general derangement of the functions of the nervous system is about all that any pathologist has been able to discern.

TREATMENT.—It is evident from the foregoing description of the disease, that nothing is presented as a guide for treatment but the symptoms. It is to these, then, as in all other cases, that the attention must be directed, in determining upon the remedies to be employed.

The remedies usually employed in the treatment of Chorea, are: *Arsenicum*, *Belladonna*, *Causticum*, *China*, *Cicuta*, *Coccus*, *Coffea*, *Crocus*, *Cuprum*, *Dulcamara*, *Hyoscyamus*, *Ignatia*, *Iodium*, *Nux vomica*, *Pulsatilla*, *Rhus*, *Sepia*, *Stramonium*, *Sulphur*, *Zincum*.

*Arsenicum* may prove useful when the disease afflicts persons of extreme debility, that are subject to coldness, and disposition to lie down; starting of single parts when falling to sleep, and when the patient is very much emaciated, and has uncontrollable twitching of certain muscles, and excessive prostration.

*Belladonna*.—Suited to plethoric subjects, addicted to pain in the head, or rushes of blood to the head; when there is convulsive

motion or twitching of the limbs, or muscles of the face; or when the patient is subject to stammering; and when any of the limbs or muscles are subject to uncontrollable movements. *Belladonna* cured chorea of a year's standing in a girl twelve years of age, of plethoric habit, and sanguine temperament, who had no control over the movements of her arms and lower extremities, and who had previously been subject to severe pain in the head, and occasional twitchings of the muscles of the face. The same remedy has also been found useful when the disease has been brought on by fright or terror.

*Causticum*.—In subjects very much emaciated, this remedy has been found serviceable in the cure of stammering. *China*, in feeble constitutions. *Cicuta*, *Cocculus*, *Coffea* and *Crocus* are remedies that may be employed in highly excitable temperaments, and *Cuprum* is well suited to the condition of the organism that favors chorea in nearly all cases. A gentleman of extensive experience remarked to the writer, that he had met with several cases of the disease that *Cuprum* appeared to cure, after other remedies had failed. Indeed, he remarked that he had found *Cuprum* 30th so effectual, that he had been nearly convinced that it was the specific remedy for the disease in all cases.

*Dulcamara*.—In cases brought on by a cold, and also in cases that appear to have resulted from suppressed eruptions.

*Hyoscyamus*.—When there is great contortions of the face, eyes and limbs, head thrown back, or drawn to the left side, oppressed respiration, wild and staring expression, convulsive laughter, or weeping, and twitchings of the muscles, delirium, small pulse and sunken features.

*Ignatia*.—When the subject is sensitive and prone to weep. *Iodium*, in persons of a scrofulous diathesis, affected with chorea.

*Nux vomica* and *Pulsatilla* may be employed, if symptoms of chorea have arisen from constipation, or accumulations of faecal matter in the intestines,—most suitable for sanguine and lymphatic temperaments. *Rhus*, if the symptoms set in after erysipelas, when the patient is yet weak and feeble. *Sepia*, in hysterical subjects; *Silicea* and *Sulphur*, as well as *Lycopodium* and *Calcarea carb.* when the symptoms have followed the drying up of cutaneous eruptions. *Stramonium*, when the features are sunken, and the

patient has small, quick pulse, and is subject to anxiety and delirium. *Zincum*, when there is painful soreness of the muscles, and visible twitching of the muscular fibres, worse towards evening.

**DIET AND REGIMEN.**—The fresh air of the country is always to be commended to patients suffering from chorea. The diet should be simple and nutritious, free from irritating condiments. All stimulating drinks should be forbidden, and the patient should be as far removed as possible from exciting scenes, and children especially should be surrounded by such a combination of circumstances as will both amuse them and promote their enjoyment in a quiet manner.

#### NERVOUS APOPLEXY.

This form of apoplexy, ranged under the neuroses, presents but little difference in the symptoms from those of serous apoplexy. It is generally preceded by nervous symptoms, tremors, convulsive movements, depraved condition of the senses of sight and hearing, more or less confusion, stupor, vertigo or delirium. The attack usually comes on suddenly after some powerful mental emotion.

The *symptoms* are ordinarily such as attend haemorrhage into the encephalon; total or partial loss of sensibility and motion, with stertorous breathing, slight convulsive movements and general paralysis. The paralysis that takes place from haemorrhage in the nervous centres, it will be remembered, is mostly confined to one side; but in nervous apoplexy both sides are affected alike, or nearly so. If it should appear on one side in a greater degree for a time, it may increase alternately to the same or a greater degree on the other; and at the same time the symptoms would be more numerous than usually attend cerebral haemorrhage.

When symptoms of apoplexy have occurred several times, and have been of short duration, and have passed away without leaving behind them any evidence of compression, it may be inferred that the difficulty is nervous apoplexy.

The duration of the disease is generally short. It frequently appears and disappears in nearly the same moment. The disease usually terminates suddenly, being accompanied in some cases by copious discharge of watery urine, belching of wind, and also discharge of flatus from the abdomen, through the rectum.

Some cases of recovery after a season of complete paralysis have been recorded.

CAUSES.—The causes of nervous apoplexy are believed to be sudden and powerful mental emotions; and the disease usually occurs in hysterical and hypochondriacal persons. It is said to be more frequent in adult males than females, and also in those excluded from the open air, as being more impressible subjects.

TREATMENT.—Since it is apparent that powerful mental emotions are sufficient to produce the disease, it is manifestly requisite, when it does occur, to adopt every reasonable measure for removing the cause. If any subject has been known to irritate and perplex the mind, that has worn upon the system, depressed the powers of the encephalon, it is quite evident that the powers of the heart and blood-vessels may be impaired at the same time. A condition favoring the occurrence of the disease may also result from the use of tobacco, or other pernicious habits; it is requisite that these should be overcome or suspended, if possible, because it would hardly seem probable that a tendency to a disease of the kind could be overcome, so long as these very exciting causes remain.

The homœopathic treatment of nervous apoplexy will require nearly the same group of remedies as other forms of the disease. If produced by protracted grief, *Ignatia* may have a good effect; *Belladonna*, if in sanguine temperaments, subject to headache; *Nux vomica* is also a remedy that may prove particularly serviceable when over exertion of the mind has been the exciting cause, and particularly if there is general paralysis without any apparent convulsive movements. *Sulphur* may also be consulted when the function of the brain has become so impaired as to produce derangement in the action of the heart and arteries. *Pulsatilla*, *Sepia*, *Zincum*, *Platina* and *Calcarea* are also remedies that may be consulted in the treatment of this disease.

DIET AND REGIMEN.—It seems very reasonable to suppose that persons subject to anything like nervous apoplexy, should be restricted to the simplest kind of diet, that is, such as will tax the digestive organs but little. Fresh air is also commendable, and also the enlisting of the attention by the introduction of pleasant subjects for conversation, and in short a resort to any judicious measures for diverting the mind from any subject that apparently impairs the function of the brain.

## CATALEPSY.

This disease of the nervous system, classed among the neuroses, consists of such a condition of the nervous centres as results in a tonic contraction of some of the muscles, so that the limbs retain the position they had prior to the attack, or in which they may have been placed during the attack.

Along with the attack, the mind and all the senses are for the time completely dormant.

**SYMPTOMS.**—There is considerable complication of the symptoms of catalepsy. Sometimes there are prodromic indications of an approaching attack, such as palpitation of the heart, yawning and stretching, cramps and cephalalgia, but, at other times, the patient is suddenly attacked with general or partial rigidity of the muscles, and a total loss of consciousness. The limbs are not thrown about as in ordinary convulsions, but they usually remain as placed before the attack comes on,—the eyes are fixed, and usually directed upwards and forwards. The respiration may remain free, unless the disease attacks the muscles concerned in respiration, then this function may be so interfered with as to render it almost imperceptible. The same may be remarked of circulation. The pulse may continue of nearly the normal character, or it may become so feeble as to be difficult of detection. The limbs for the most part continue flexible, but stiff when an attempt is made to move them. This is not always the case, for in rare cases they become perfectly rigid, and will retain any position in which they may be placed.

The face is somewhat flushed, and the skin usually warm. In very rare cases, the mind remains unimpaired, but in the greater proportion of cases the paroxysm causes an entire suspension of sensation and intellectual action, so that nothing whatever that occurred during the paroxysm is recollected. Neither has the skin any sensibility; it may be pinched or pricked without the patient experiencing any pain; light will not contract the pupil of the eye, and the hearing is entirely suspended.

The attacks vary in duration; sometimes they are transient, and pass off very soon; at other times they continue for hours, and even days, presenting one of the forms of *trance*, it is supposed, which has been described by authors.

**CAUSES.**—It has been observed that persons subject to catalepsy,

possess a highly impressible nervous system, and on this account the affection has been the most frequently noticed in hysterical subjects, and most authors regard this affection only as a variety of hysteria. This being the case, we may look to mental agency as constituting the most apparent exciting cause of the difficulty.

TREATMENT.—This disease being so nearly allied to other neuroses, and especially to hysteria, of which this is regarded as a variety, that we may defer the consideration of the specific treatment till we have considered this disease.

#### HYSTERIA.

This description of neuroses is so named from its supposed origin, in connection with the uterus. But this idea is not generally received at the present day, although it is probable that some morbid condition of this organ may often prove an exciting cause. Many cases occur in males, as well as in females, and this circumstance alone would negative the idea of there being necessarily any such connection.

SYMPTOMS.—These are so various that it would be utterly impossible to enumerate them, or even describe them, except in a general way. There is scarcely any disease which hysteria cannot simulate, yet there are symptoms that may be regarded peculiar to the affection. As in the other neuroses we expect to find hysterical subjects highly endowed with nervous symptoms, unusually impressible, easily excited to laughter and crying in alternation, without any assignable cause, and to great variations, as their spirits, sometimes severely depressed, and at other times unusually elevated, accompanied by a greater or less degree of hypochondria. These symptoms, with the sensation of a ball ascending in the throat, inducing a feeling of suffocation, sometimes fill the patient with fearful forebodings. This sensation of the ball is what is termed the *globus hystericus*. Attending this difficulty is also severe palpitation and occasionally dyspnœa, headache, constipation, and a copious secretion of limpid urine. These may be regarded as symptoms that characterize hysteria in a mild form, and when they occur suddenly but little doubt is left of the attack being that of hysteria.

In other cases these symptoms may precede spasms, which are of an exceedingly violent character. Ladies attacked with this form

of the disease, even if of feeble frame and delicate muscles, will sometimes be so severely affected as to require the exercise of great strength to keep them in bed, the trunk of the body being twisted in all directions, the limbs being moved so forcibly as to defy all efforts to control them—the hands become so forcibly clenched as to resist all attempts to straighten the fingers. It will be seen that this form of the disease differs in nothing from what we described under the head of catalepsy, which we stated was but a variety of this affection.

As patients recover from the severe forms of hysteria, the fits of laughing and crying often recur, with distressing hiccough. The intelligence often remains undisturbed, and this shows the wide distinction between hysteria and epilepsy,—but when the disease takes the form of catalepsy, both the intellectual and moral faculties are grossly perverted, at times, so that obscene manœuvres are often persisted in by the patient, utterly at variance with the usual character and habits.

The severe form of the disease may continue for a longer or shorter period,—recovery usually takes place in a few hours, and the patient is restored to her former condition, feeling fatigued on account of the extra exertion to which she has been subjected, and perhaps some degree of lethargy, which gradually disappears. Dr. Samuel George Morton, who bestowed considerable attention to this disease, described as a particular diagnostic sign of hysteria, a peculiar gnawing pain situated immediately below the left breast, in a hollow formed between the cartilages of the fifth, sixth and seventh ribs, and generally so circumscribed that it may be covered by a penny; the seat of this pain is believed to be in the intercostal nerve.

To a young practitioner an attack of this disease, if severe, appears most formidable, yet the prognosis is always favorable. An uncomplicated case of hysteria seldom if ever proves fatal. When such is the case, the disease has evidently been the exciting cause of some other mischief, implicating some of the vital organs. This undoubtedly has been the case in some cases. The writer once had under his charge an irritable and troublesome patient accustomed to forebode evil about almost all the affairs of life, who was subject to attacks of hysteria every little while, of the most formidable character; after many severe attacks her frame began to sink, and

she finally appeared to sink away and die from a worn out and exhausted condition of the nervous system. Hysteria may merge into epilepsy; under such circumstances the knowledge of the former hysterical condition may render this latter difficulty somewhat obscure, and not easy to diagnosticate.

The occurrence of the paroxysms of hysteria are somewhat irregular, as they may be developed at any time, when an exciting cause is present.

The tendency to the disease may disappear under the changes that take place in the system during the progress of life. The disease usually occurs previous to the middle age, and it has been observed that persons rarely suffer from it, after thirty or forty years of age. When protracted, the system may become so impressible, as to allow the slightest circumstance to develope a paroxysm, or induce a fainting fit, or severe palpitation of the heart.

**CAUSES.**—The description which we have already given of this malady would argue that it is an unusual impressibility of the nervous system which constitutes a predisposition to it. Sometimes this predisposition is congenital and natural, at other times it is acquired. It may exist in both sexes, but for obvious reasons it is more frequently met with in females. Any morbid condition of any of the organs that will superinduce this impressibility, may be reckoned among the exciting causes. At the commencement of menstruation, as well as at the regular periods after, the nervous system of the female may become very impressible. At such times a more trivial exciting cause may give rise to hysteria, than at other times when the system is stronger and less impressible. Sudden and powerful mental emotions are the most common exciting causes, when these occur at periods when the whole system is rendered highly impressible from the causes above named.

Hysteria being properly a disease of the nervous system that presents peculiar phenomena without betraying any organic derangement or lesions, of course leaves us without a knowledge of the precise pathological condition of the nervous centres. Nothing has been elicited from autopsy to throw any further light upon the nature of the disease, than can be inferred from the symptoms. It has been inferred, however, by prominent writers upon the subject, that many of the protean forms of hysteria are referable to irritation of the *medulla spinalis*, especially its dorsal portion.

TREATMENT.—The treatment of hysteria may be divided into that which should be called into requisition during a paroxysm, and that which is requisite during the intervals, for the purpose of obviating the predisposition to them.

The remedies that may be employed are *Agnus castus*, *Asarum Europæum*, *Aurum*, *Belladonna*, *Bryonia*, *Calcarea*, *Causticum*, *Cicuta*, *Coccus*, *Conium*, *Ignatia*, *Lachesis*, *Moschus*, *Nux moschata*, *Nux vomica*, *Platina*, *Pulsatilla*, *Sepia*, *Stramonium*, *Sulphur*, and some others.

*Agnus castus* and *Asarum Europæum* are remedies that in some cases may prove very useful. When there is excessive sensitiveness and sadness, with apprehension of impending death, *Agnus castus* would seem to be indicated; and in persons of nervous excitement and mirthfulness, subject to stupifying drawing or pressure in the head, mostly in the temples, *Asarum* is preferable.

*Aurum* is well suited to females sensitive to pain and given to melancholy and desire for death, and when the paroxysms are preceded by anguish and inclination to suicide, and also when the patient is prone to despair or is quarrelsome, and complains of headache, as if bruised by blows, when exciting the mind until it becomes confused.

*Belladonna* is suitable when the paroxysm is preceded by severe pain in the head, as if there is hyperæmia of the blood-vessels of the cerebrum, and when the face appears flushed, the eyes red and swollen, and when the senses are unusually excitable, and when there is sadness and hypochondriac lowness of spirits, anguish, restlessness, or raging mania. This remedy is well suited to cases of catalepsy, in persons of sanguine temperament. *Bryonia*, in those of a bilious temperament, afflicted with hysterical spasms, given to crying, fulness and heaviness of the head, with digging pressure in the direction of the forehead.

*Calcarea*, when there is dizziness or dulness of the head, vertigo and headache, or hemicrania, with eructations and inclination to vomit, constriction of the throat, sensation of swelling at the pit of the stomach. *Causticum*, when the paroxysm is preceded by melancholy and weeping, with apprehension, anxiety, vertigo, oppressive headache, stitching pains in the temples, jerks and shocks in the head, good deal of mucus in the mouth. These two remedies are suitable for persons of a scrofulous diathesis, or subject to eruptions.

*Cicuta*, when there is trembling of the limbs, and general convulsions, or catalepsy, and spasmodic pains of various kinds, and mania, laughing, and foolish gesticulations, staring of the eyes, pale face, and froth at the mouth, jerking and twitching of the upper and lower extremities.

*Cocculus*, when the attack is preceded by vertigo, as if intoxicated, and the patient is given to sadness. *Conium* is useful in hysterical complaints, especially in unmarried persons subject to fainting fits, or irritation of the spinal marrow, and particularly when there is general languor, with desire to laugh, out of spirits, indifferent, lazy and irritable. This remedy is also suitable when the hysteria seems to be connected with derangement of the uterine functions and constipation of the bowels.

*Ignatia*, for females of extreme sensitiveness, and disposed to weep; paroxysms come on with irresistible inclination to weep, and go off with sobbing, and when the hysterical spasm comes on after eating, with hiccough, and when there is empty and weak feeling at the pit of the stomach, abdominal spasms, sensation of a ball in the throat, alternately with a sad and weeping mood; headache, with inclination to vomit, or as if a nail were driven into the brain; spasms after fright and mortification, and for general hysterical debility and fainting fits.

*Lachesis*, when the attacks come on with shrieks, and are preceded by a strange feeling in the throat, deep-seated headache, with nausea, fearful foreboding, fear of death, excessive moaning, mental alienation after chagrin, vertigo, with headache, especially before the menses, shortness of breath, gnawing hunger, sensation of suffocation in the wind-pipe, icy cold feet and hands.

*Moschus*, when there is fainting and debility, especially at night, and particularly in hysterical females at the menstrual period, and when the menses appear too early and too profuse, and also when there is constriction in the wind-pipe, suffocating, spasmodic constriction of the chest, burning in the hands, and uneasiness in the lower extremities.

*Nux moschata*, when there is disposition to laugh at every thing, headache above the eyes, worse during motion; difficult menstruation, oppression of the chest, fainting fits and hysterical spasms, with excessive languor, especially in the knees and small of the back, with drowsiness, mania or headache, with sense of looseness of the

brain when shaking the head; pains in the back and small of the back, as if bruised and lamed by blows.

*Nux vomica*, when the hysteria appears to be connected with disordered digestion, fainting turns after dinner, paralytic weakness of the limbs, it is suitable for sanguine and choleric temperaments, subject to gastric derangements and bilious complaints, excessively sensitive to external impressions, irascible and irritable.

*Platina*, when the paroxysms of hysteria are unattended with loss of consciousness, excessive debility, spasmodic yawning, headache gradually increasing and decreasing, numb feeling in the head, burnt feeling of the tongue, constrictive feeling of the chest, and when the hysteria seems connected with uterine derangement.

*Pulsatilla* is evidently one of the best remedies that can be resorted to in hysteria in young females at the age of puberty, when it may result from the exceedingly impressible condition of the system, which this critical age is apt to engender. *Sepia* is a remedy that is equally useful for the complaint in females subject to paroxysms of sick headache, afflicted with prolapsus uteri, and prostrating leucorrhœa.

*Stramonium*, for cataleptic stiffness of the whole body and other kinds of spasms, attendant upon suppressed eruptions or secretions, and when there is coldness of the whole body, and when the spasms are not attended with loss of consciousness. *Sulphur* may be called into requisition in psoric constitutions, in changing the condition of the system that favors the development of the disease.

As remarked in the description of the disease, hysteria may present so great a variety of symptoms as well as resemblances to other affections, that it is difficult to point out a treatment that will answer the demands of the system under all circumstances. During a severe attack of hysteria, the remedies selected may be administered frequently; during the interval between the attacks remedies must be selected to meet the condition of the system, so as to overcome the predisposition and obviate, if possible, the recurrence of the attacks, or to materially lighten them, should they recur, and it should be an invariable rule to remove all exciting causes as much as possible. Nothing is more to be commended, when practicable, than walking or riding in the open air, for this course will tend to strengthen the nervous system and fortify the patient against the disease.

DIET.—The diet should be plain but nutritious, free from stimulants, such as coffee, wine, strong tea and malt liquors; bathing is also to be commended as a necessary means of refreshing and invigorating the system.

NOTE.—Where signs of plethora exist during an hysterical fit, *Aconite* may be administered every thirty minutes till the patient is relieved, and during the interval, if the pulse is full and bounding, a dose of this remedy may be taken every day. If the bowels are constipated, *Nux vomica* or *Lycopodium* may be substituted for the *Aconite*, until this difficulty is relieved, and particularly if there is torpor of the intestines, and during this time the patient should subsist upon a low diet and persist in regular exercise.

On the other hand, when the habit is languid, *Ferrum* may be administered during the attacks, and in the interval this remedy or *Stramonium* may be given in daily doses in connection with a more generous diet, provided the digestive function is not materially impaired.

*Sulphur* in the evening, and *China* in the morning, will prove useful in feeble and psoric constitutions in fortifying the system against the recurrence of the disease.

#### TETANUS.

This formidable malady, when general, consists in a permanent contraction of all the muscles, without alternations of relaxation; when partial, only some of the muscles are implicated.

This disease is termed trismus, or lock-jaw, when the lavator muscles of the lower jaw are the seat of contraction.

It is termed opisthotonus, if seated in the extensors of the body, so that the body is bent backwards.

If the body is thrown forward it is termed emprosthotonus, and pleurosthotonus or lateralis if the body is bent to one side.

SYMPTOMS.—If the disease arises from a wound, the patient usually manifests great impressibility of the nervous system, with convulsive condition of the muscles of the neck and jaws.

In most cases the disease commences with permanent contraction of the masseter and temporal muscles, so that it is impossible to exert sufficient force to depress the lower jaw. At times the diff-

culty extends no further for several days; then the muscles of the neck may become implicated, and finally those of the trunk and limbs. Opisthotonus is the most common form of the disease, but it may assume any of the other forms.

The body, during the violence of the disease, resists every attempt to move it; the muscles are hard and drawn into knots; after awhile there is some diminution of the spasm, and the muscles may become partially relaxed and admit of some motion, and even allow a temporary use of the muscles of deglutition in the prehension of liquids; but a remission of this kind is very generally followed by a more severe spasm.

Death is a common result of this disease, and it appears to be induced by asphyxia, the mechanical operation of respiration being interrupted. The mind sometimes remains unmipaired, and the senses may remain almost to the last moment. The circulation generally becomes accelerated.

The most fortunate cases are those of trismus, or lock-jaw. Those less so, present the form denominated opisthotonus, and these are sometimes so severe that the sufferer can only rest on his heels and occiput. Not unfrequently the muscles of the abdomen and the diaphragm are affected with irregular spasms, occasioning severe suffering.

It has been regarded a favorable indication if the pulse does not exceed 110 per minute, on the fourth or fifth day of the disease, but this appears to afford a slight foundation for favorable prognosis. Sometimes the skin feels hot, and presents a temperature far above the ordinary elevation.

The disease sometimes terminates in a few hours, but at other times it may last several days, weeks or months. Andral states the average duration to be four or five days.

The *prognosis* of the traumatic form is usually unfavorable, though under homœopathic treatment it is probable that many cases may be cured.

**CAUSES.**—A predisposition in the nervous system, which when met by a sufficiently exciting cause, brings on the disease. The disease being more common in warm climates, leads to the inference that an elevated temperature of the atmosphere may be classed among the exciting causes. Bathing in cold water, when the body is warm with perspiration, may also bring on the disease.

The pathological condition of various organs, such as inflammation of the intestines, or any irritation in the alimentary canal, as well as intense mental emotion, may give rise to it. Certain drugs also are known to produce tetanic convulsions, when administered to persons in health; *Nux Vomica*, *Strychnine*, and *Brucine*, are of this class. But in many instances the disease may occur without any assignable cause.

The precise change in the organism, or the organic cause or condition in the nervous system that favors the occurrence of tetanus, is not known, as no post mortem facts have been elicited that will warrant any conclusion as to what lesions, if any, may have existed, calculated to develop the disease. *Eccentrically*, it has been demonstrated that tetanus can be developed from injuries or irritations, at a distance from the medulla spinalis, but not, however, without some kind of morbid change being produced in this centre, or otherwise tetanus would not result.

It is by no means improbable but that tetanus may be developed *centrally*, that is, from some morbid change in the spinal marrow not all dependent upon an irritation in some remote part of the system.

That which is developed *eccentrically*, and called the traumatic tetanus, is by far the most common; the irritation is first induced in the terminal extremities of the nerves—it is thence extended to the medulla spinalis, and whether this condition of the medulla be one of irritation or inflammation, has been a question not yet settled. In a large number of observed cases, there has been considerable engorgement of the blood-vessels of the meninges or of the medulla itself, disclosed on dissection, but this appearance may be accidental and disconnected from the disease. Since, therefore, the intricate nature of tetanus is unknown to us, we must be governed by the symptoms in the treatment of the disease.

*Treatment.*—The treatment of tetanus homœopathically, may prove successful in some instances; under allopathic treatment, but little success attends the efforts of the practitioner. In the multitude of experiments that have been made by drugs upon systems suffering from this disease, it might seem reasonable to suppose that some have been hit upon having a homœopathic action. Such undoubtedly is the case with regard to *Strychnine*, *Hydrocyanic acid*, *Cannabis indica*, &c.

*Arnica*, *Belladonna*, *Cannabis indica*, *Hyoscyamus*, *Lachesis*,

*Nux vomica*, and *Pulsatilla*, are among the homeopathic remedies employed in the treatment of the disease.

*Arnica* has been particularly indicated when the disease has been produced from irritation arising from local injury, which is by far the most dangerous form of the disease. It may be used both internally and externally. This form of the disease, termed traumatic tetanus, may be arrested by treating external irritations, by applying the tincture of *Hypericum*. The same remedy taken internally may have a good effect.

*Belladonna*, in sanguine temperaments, is one of the most useful remedies for that form of tetanus brought on by a cold, or the lockjaw. It is also useful after *Arnica* in traumatic tetanus. The indicating symptoms are sensation of constriction in the throat, with tightness in the chest; grinding of the teeth, spasmodic clinching of the jaws, distortion of the mouth, foaming, interrupted deglutition, and removal or aggravation of the paroxysms on attempting to drink.

*Cannabis indica* is known to produce symptoms resembling *tetanus*, when taken in large doses by persons in health, and for this reason it may prove valuable as a remedy in the treatment of the disease. *Hyoscyamus* may be used in connection with *Belladonna*, particularly in trismus. *Lachesis* in *Opisthotonus*, and also *Stramonium*, *Opium*, and *Rhus tox*. From the fact that *Nux vomica* acts upon the medulla spinalis, this remedy may be usefully employed in the treatment of this disease in *sanguine* and *bilious temperaments*. *Pulsatilla* may be employed in persons of a mild disposition and lymphatic temperaments.

*Mercurius viv.* in trismus of an inflammatory character, with swelling of the angle of the lower jaw, and tension of the muscles of the throat and neck, from cold.

Sometimes it will be difficult to administer remedies, in consequence of the jaws being so tightly clenched, except by olfaction, or merely bathing the lips with the medicine in solution, or perhaps in the form of an *enema*.

*Diet.*—The diet will of course be necessarily simple, as it will be difficult for the patient to take much, except in the form of a liquid. Powerful stimulants have often been called into requisition as palliatives, such as laudanum, black drop, and brandy, but under homœopathic treatment these should be discarded as obstacles in

the way of a cure. The use of a flesh brush upon the surface of the skin may prove useful, but the application externally of revellants of any kind, whether in the form of sinapisms or ammoniated lotions, are believed to be pernicious. The use of cold or even tepid baths is not clearly seen, and therefore they should be employed with great caution.

#### RABIES HYDROPHOBIA.

The term "Hydrophobia," literally signifies a dread of water, which is recognized as the chief characteristic of the disease, produced by the bite of a rabid animal. Water, however, is not the only thing, the sight of which throws the patient into convulsions, for it has been observed that mirrors or polished bodies may have the same effect. Andral maintains that something closely resembling the disease may be occasionally met with in hysteria, and in some febrile affections accompanied with excessive nervous impressibility. The disease bears a close resemblance to tetanus.

*Symptoms.*—First, those which occur before convulsions take place, as follows: After an indefinite interval has elapsed from the time of the infliction of the bite, uneasiness is felt in the wound, which occasionally is re-opened, though under some circumstances, no local inconvenience is felt at all. At the same time, the patient complains of dulness and sense of heaviness in the head, is low spirited, and restless at night, often disturbed by terrific dreams, the appetite fails, and there is an indescribable dread in the countenance. These symptoms may occur from mere dread, without the positive existence of hydrophobia.

In the second stage, the symptoms are by no means equivocal; this is termed the characteristic stage, the invasion of which is denoted by the patient being attacked with a kind of convulsive shuddering, and very soon after with real convulsions of the muscles of respiration and deglutition. *The pneumo gastric nerve* in the larynx, as well as a portion of the fifth nerve in the face or fauces, appear to be subject to great impressibility, which is reflected upon the muscles of the pharynx and larynx, and the most distressing dysphagia or dyspnœa results. The convulsions come on in paroxysms, more and more frequent, and constantly increasing in intensity until death ensues.

The sight of water, flashes of light, or polished surfaces, and sometimes the least noise, will bring on an attack of the most horrible spasm of the muscles of the pharynx and larynx. Any attempt on the part of the patient to overcome this dread of water is attended with unutterable anguish and the most distressing corporeal effort. The muscles of the face are thrown into violent agitation, and those of the throat and trunk contract so forcibly, as to threaten suffocation. These attacks at first, last but for a short time ; but subsequently they occur with violence, and somewhat prolonged ; the intervals between the paroxysms become shorter and more disturbed. The intellect, in a majority of instances, remains sound, and frequently the patient will utter warnings to those around him to keep out of his way lest he may bite them, or otherwise do them an injury. Ultimately, the whole system becomes agitated, the face red, the eyes sparkling, the pulse small and contracted, and the convulsions which occur at this stage are of the most inveterate character. Agony and terror seem to be depicted upon the countenance ; a frothy saliva flows from the mouth. The muscles of the stomach and intestinal canal participate in the difficulty, and there is constant vomiting, with hiccough, and a cold, clammy sweat breaks out from every part of the cutaneous surface ; the vital powers diminish, the pulse is scarcely perceptible and intermittent ; the respiration becomes difficult, and the patient, amidst unutterable sufferings, sinks and dies.

The duration of the disease is not always the same. Sometimes it proves fatal in twenty-four hours, and at other times it may continue for three or four days, or a week ; but the average duration of the disease before the patient sinks, is from fifty to sixty hours.

CAUSES.—The original cause of the disease in animals is not known ; it is believed to be spontaneous, but when one becomes affected by it, others may become the victims, by having the virus communicated by its bite. It is not known that the disease ever arises spontaneously in human beings, or even in animals, except those of the canine race.

Some authors have maintained that genuine hydrophobia may be induced by powerful impressions, made upon the nervous system ; and it is probable that many of the symptoms of rabies may be present in some cases of hysteria and monomania ; as for instance, in these diseases, the nerves of deglutition and respiration may be

excessively impressible at the sight of liquids or mirrors, but the strong resemblance of these symptoms to hydrophobia does not argue their identity. They differ from them as not being dependent upon any lesion of the nervous centres that may not end in a restoration to health: whereas, the symptoms induced by the bite of a rabid animal are in most cases fatal.

Other authors have maintained that the symptoms following the bite of a rabid animal, and already described as characterizing hydrophobia, are essentially those of hysteria, and altogether dependent upon the imagination; but this view of the case is negatived by the fact, that children so young as not to be suspected of being under the influence of the imagination, become the victims of the disease from the bite of rabid animals, and moreover, the disease is often communicated from animal to animal in the same way, a fact which proves beyond a doubt, that the imagination has but little to do in generating the disease.

It has also been argued that the bite of a healthy animal can induce the disease, and that it varies but little, if at all, from traumatic tetanus. There is undoubtedly a resemblance between these diseases, but they are not identical, and the fact must be acknowledged, that a rabid animal is capable of communicating a poison to men by inoculation, which induces a specific action upon the nervous centres, and produces the disease which is known under the name rabies or hydrophobia. Andral supposes that the disease is communicated exclusively through a wound, or a surface where the cuticle has been removed, but that it may be communicated by placing the virus in contact with a mucus membrane whose epithelium is entire, and Chausier says, the application to the nose of a handkerchief impregnated with the saliva of a mad dog, has been known to produce the disease in man.

Most writers have agreed, that the saliva modified by some morbid cause, is the agent by which the disease is induced in man, yet some have believed that the hydrophobic virus is a secretion by itself, mixed with the saliva, and with it applied to the wounded part. The investigations of Marochetti, a Russian physician, led him to take this view from the fact that from the third to the ninth day of the disease, whitish pustules are perceptible near the fraenum linguae, which open spontaneously about the thirteenth day. The only confirmation of this learned gentleman's views has re-

rulted from the dissection of numerous persons, who have died of hydrophobia, in whom were found considerable development, mostly inflammatory, of the mucus crypts at the base of the tongue, the pharynx and the upper aperture of the larynx. It would seem, also, from analogy, that the hydrophobic poison was a secretion from the blood, from the fact that lambs have become affected from merely sucking ewes that had been bitten by a rabid dog.

Hydrophobia does not always result from the bites of animals known to be decidedly rabid. Wagner remarks, that he has witnessed a number of instances of the kind, where the remedies employed were merely such as were superstitiously regarded effectual; and from this fact, he was led to infer that a predisposition to the disease rarely exists in man.

It is generally believed, that man laboring under the disease can communicate it to his fellow-man, but there are no facts to warrant the conclusion, yet the feeling is that he can. *Breschet* inoculated a dog with the saliva of a man suffering from hydrophobia, and in thirty-eight hours the animal became rabid, and bit several dogs, which also became rabid. How the hydrophobic virus placed thus eccentrically, affects the great nervous centres, is a mystery. The wound often heals entirely before the disease breaks out, and in some instances the recollection of the occurrence has been entirely obliterated.

*Treatment.*—Hydrophobia has uniformly been regarded a hopeless disease to attack, but cases have been cured under homœopathic treatment. Doctor *Ramsbotham* of Nova Scotia, has cited a case of cure of confirmed rabies in a man, and Doctor *Comstock* of St. Louis, has also detailed the successful treatment of a case that came under his care. The most important part of the treatment to be employed, however, is that which obviates an attack of the disease, after a person has been bitten. There are judicious means to be employed at once for the purpose of extracting the virus when one has been bitten, and none will be more likely to prove successful than the use of the potential cautery, or red-hot iron, held so near the wound as to attract to the surface the poison that may have been communicated. Should the application of the cautery fail, but little advantage can be gained from excision of the part, or by disorganizing the entire surface of the wound, as absorption takes place so rapidly, that the whole system may be under the

influence of the virus before the knife could be successfully brought to bear in the case. A variety of means have been suggested to be employed, as prophylactics, that need not be detailed, as nearly all of them have failed, in cases where there was no want of evidence of the virus having been communicated.

In the homœopathic treatment of this disease and its prevention, the following remedies may be employed, viz. : *dry or radiating heat, Belladonna, Cantharides, Hyoscyamus, Lachesis and Stramonium.*

Hahnemann cites *Belladonna* as a certain preventative of hydrophobia, to be given every three or four days, but the application of radiating heat at the same time is commended. This may be done by means of a red-hot iron or live coal, placed as near the wound as possible without burning the skin or causing too intense pain ; the heat should be continued for an hour, or until the patient begins to shiver and stretch himself.

*Cantharides*, a useful preventive as well as a curative, may be employed when there is great dryness and burning in the mouth and throat, much aggravated on attempting deglutition ; or paroxysms of fury, alternating with convulsions, which are renewed by any pressure on the throat or abdomen, and also by the sight of water ; fiery redness and sparkling of the eyes, which become prominent and frightfully convulsed ; spasms in the throat, excited by the pain produced by the action of the muscles of deglutition, when attempting to take fluids. *Belladonna* is more available when there is drowsiness, with ineffectual efforts to sleep, in consequence of mental anguish and agitation, sense of burning in the throat, with accumulation of frothy saliva in the throat and mouth ; frequent desire for drinks, which are spurned on being presented, and a suffocating or constrictive sensation in the throat on attempting to swallow ; the muscles of deglutition spasmodically affected, so that the patient cannot swallow ; glowing redness and bloated appearance of the face ; pupils immovable and generally dilated ; great dread ; occasional desire to strike, spit at, or bite, or tear anything the hands are laid upon ; inclination to run away, continual tossing about, great physical activity, twitching in various muscles, especially those of the face, ungovernable fury, foaming at the mouth and tetanic spasms.

Along with *Belladonna*, or either before or after the use of this remedy, *Hyoscyamus* may be employed where the convulsions are

severe and of long duration, and when the inclination to spit or bite is not so apparent, but a desire to injure those who attend in some way ; dread of liquids on the account of the pain of swallowing and spitting out the *saliva* for the same reason ; excessive convulsions, with loss of consciousness soon after an attempt to exercise the organs of deglutition.

When strong convulsions result from fixing the eye upon brilliant objects, or polished surfaces, or whatever reminds the patient of water, *Stramonium* may be employed, and especially when there are fits of laughter and singing ; severe convulsions, alternating with ungovernable fury. *Lachesis*, when the convulsions take place, may prove a useful remedy.

*Argentium nit.*, *Mercurius viv.* and *Veratrum*, are remedies that may also be consulted in the treatment of this distressing malady.

## DELIRIUM.

By this term is meant a kind of incoherence so often associated with fever, a wandering or straying of the mind from strict rationality.

CAUSES.—These may be *centric* or *eccentric*, or those that are seated out of the encephalon, or those acting immediately upon it.

In persons highly impressible, the slightest pain in any locality by inducing modifications of the cerebral function, may cause it eccentrically, and it may be caused centrically, by cerebritis, hyperæmia, or from any cause acting immediately upon the cerebral hemispheres or their meninges ; or it may occur from want of excitement in this nervous centre, which may be occasioned by loss of blood, or loss of vital power occasioned by the over-action of the nervous function, as in typhoid fevers. It may also be occasioned by exciting or intoxicating drinks and narcotics, or any thing that impairs the function of that part of the brain immediately concerned as the seat of the mental faculties.

The only *pathological appearances* that have been disclosed by post-mortem examinations, where persons have died in a state of delirium, are traces of inflammation of the meninges, and of the convolutions and hyperæmia of the blood-vessels of the cerebrum.

Treatment.—Delirium being for the most part a symptom attend-

ant upon febrile diseases, it is to the peculiarity of the symptom, or rather to the kind of delirium manifest, that we are to direct the attention, in order to ascertain the remedy that may be indicated.

Against delirium in general, the following remedies may be employed : *Aconite*, *Arnica*, *Aurum*, *Belladonna*, *Bryonia*, *Hyoscyamus*, *Stramonium* and *Sulphur*.

When the delirium appears marked with anxiety or fright, as if the patient were very solicitous about something, or is actually frightened on the account of something illusory, the remedies that have been found to answer the best are, *Belladonna*, *Hyoscyamus*, *Opium* and *Stramonium*. If the pulse appears to be full and bounding, or other signs of inflammatory action, *Aconite* may be employed. If there is gastric derangement, or constipation of the bowels, *Nux vomica*, or if at the age of puberty in young females, *Pulsatilla* and *Calcarea carb.* may prove useful.

When the delirium is characterized by the patient indulging in all kinds of fancies, *Belladonna*, *Stramonium* and *Sulphur* are three of the most prominent remedies to be employed. *Hyoscyamus* and *Opium* are sometimes useful, and so also may *Chamomilla*, *Sepia* and *Silicia* be called for in certain temperaments.

For *loquacious delirium*, *Belladonna*, *Rhus tox.*, *Stramonium* and *Veratrum*. When the patient is merry, *Belladonna*, or else, *Aconite*, *Opium* and *Veratrum*.

For a low muttering delirium, *Arsenicum*, *Belladonna*, *Hyoscyamus* and *Stramonium* are most frequently employed. *Carbo vegetabilis*, *Nux vomica* and *Opium* are also worthy of being consulted.

For *furious delirium*, *Belladonna*, *Bryonia* and *Opium*, are among the most prominent remedies. *Aconite* and *Cocculus* are sometimes useful, to meet certain conditions. *Plumbum* and *Veratrum* are also indicated ; the former, when there is obstinate constipation, as in cerebral inflammations, and the latter, when there is great prostration and tendency to diarrhoea.

For *delirium characterized by singing*, *Belladonna* is indicated. The symptom presents so many phases, as being mirthful, sad, melancholic, &c., that it is not unlikely that the polychrests may be the most reliable remedies to consult, but in prescribing for this single phenomenon, the fact must not be lost sight of, that the age, temperament, general features of the disease, in other respects, are severally to be taken into account.

## MENTAL ALIENATION.

The apparent distinction between delirium and mental alienation is, that the former is attendant upon febrile conditions of the system and the latter not ; but the term "mental alienation" is not easily defined, although it is usually employed to denote a continued or intermittent derangement of the intellectual and moral faculties. When the system is exalted by fever, the derangement of the mind varies as the fever rages, in a greater or less degree, but in cases of pure mental alienation, where no fever is present, the variable symptoms are attributed to other causes. Most writers have considered the following divisions of mental alienation advisable to be borne in mind, in order to facilitate accurate statistical comparisons which are so desirable.

1st. Those cases of mental alienation which consist in a mere perversion of the mental and moral faculties, and

2. Those which consist in the impairment or loss of the same faculties.

Under the first may be recorded, *mania*, in which the intellect is completely perverted upon all subjects: second, *monomania*, or partial insanity, in which the perversion is restricted to one subject; and third, *moral insanity*, which consists in a morbid perversion of the natural feelings. Affections, inclinations, temper, habits, moral disposition and natural impulses, without any remarkable disorder of the intellect, and particularly without any insane illusions.

Under the second may be reckoned, first, *dementia*, in which the intellect has been impaired or destroyed; and, second, *idioey*, where the deficiency of the intellect is congenital.

The *symptoms of mental alienation consisting in perversion of the intellectual and moral faculties* are as follows, viz.: some strange aberrations are first noticed in the tastes, habits and notions differing entirely from those of persons of sound mind. These may continue for an uncertain period before the disease becomes fully formed; after which the strangest hallucinations are experienced, the patient sees objects that exist only in his own imagination; he hears unusual sounds, and the senses of taste and smell are also subject to equal illusions. He will often expose himself to the ex-

tremes of temperature, either to the cold until his limbs become stiffened, or to extreme heat sufficient to roast them, without uttering any complaint. It is thought by some, that extreme cold has not the same effect upon the insane as the sane, but this is a mistake,—the organs of perception being disordered, the painful sensations may not be experienced, though the physical effects may be the same. The reason, at times, becomes entirely dethroned, and then there may be incessant and incoherent talking, in the most excited manner. At other times, the reason may seem right upon all subjects but one, and when this cord is touched, the insane delirium is excited.

Although the reasoning faculties may be perverted, the memory of past events may be perfectly retained, but the affections towards friends and associates may be perfectly transformed into unwarrantable suspicions and hatred. The feelings and actions of the strangest character—some may be gay, timid, wild, frank and humble—others, sober, dull, passionate, cunning, mischievous and haughty—some are destructive and quarrelsome, and will do violence to persons and things that surround them, and some seem engrossed with melancholy, and are full of religion. The expression of the countenance betrays the predominant emotion. When excited, the face is flushed, the eyes sparkling, the voice is clear and loud; when otherwise, the face is usually pale, the expression tranquil, and the voice weak. Sleep is banished for the most part, or when indulged in, it is generally disturbed, and by no means refreshing. Unlike the febrile delirium, the insane condition presents no derangement of the nutritive function; the appetite may be as good and the digestion as easy, as in persons enjoying sound health.

In *mania*, the mental perversion is generally excited; when its highest pitch is attained suddenly, it has been termed *acute mania*, or raving madness. When more tardy, and the disease seems protracted, it is termed *chronic*.

In *monomania*, or in cases where the insane delirium concerns but one idea, the patient, if ambitious, fancies himself a king, or some exalted personage; if religious, he is perpetually praying; if misanthropic, he indulges in hatred of his fellow men; and if despairing, he is in constant dread of his fate hereafter, &c.

*Moral insanity* consists in a morbid perversion of the sentiments, feelings and affections, and frequently without any derangement of

the mental faculties ; the patient is singular, eccentric, fickle, and capricious, and manifests a tendency to gloom or sadness or to preternatural excitement of angry and malicious feelings, and a propensity to steal or to commit other kinds of mischief, and, in short, the whole moral character of the patient is changed.

The *symptoms of mental alienation which consist in the impairment or loss of the intellectual and moral faculties*, are such as may result from *dotage*, and are characterized by total incoherence of ideas, absence of all faculty of reflection, and the sensorium seems to have lost all power of receiving impressions from without ; the recollection of the past is lost, though sometimes what transpired in early life is recollected. In complete dementia, however, nothing is remembered, all intellectual and moral manifestation is gone, and the patient only lives as a helpless and deplorable character. Sometimes the animal feelings persist, and he cries or laughs, without any assignable cause.

This form of the disease usually takes place gradually, and sometimes after furious mania, and at others, the sinking is but a gradual subsidence of the faculties.

*Idiocy* differs from *dementia* or loss of the faculties, in being a congenital difficulty, usually dependent upon imperfect organization of the encephalon, and it may exist in various degrees.

The *symptoms* that are characteristic of fully developed idiocy cannot well be mistaken ; a vacant stare of the eyes, slavering from the mouth, which is usually open. The cerebral convolutions for the most part appear to be undeveloped ; the head is deformed, so as to attract the attention even of the unprofessional, and accompanying these deformities are usually found a faulty memory, and great difficulty of learning ; an imperfect articulation, rendering it difficult to pronounce a single word ; an absence of ideas, and in some instances a total want of comprehension. The degree to which the power of speech exists, has been regarded as a measure of the intelligence. The idiocy is extreme when the subject cannot appreciate words spoken to him, so as to be able to repeat them, but less so, when the degree of comprehension is greater.

In consequence of this deficiency of intellect, the animal propensities, developed at the age of puberty, being uncontrolled by reason, are often offensively manifested, and the idiot requires con-

stant attention to guard him against filth, and to prevent him from disgusting exhibitions.

In some rare cases, the memory is not much impaired, or a talent for music, or something analogous, may be so great as to excite astonishment.

In advanced stages of insanity, a *general paralysis* has been observed, supposed by some to be dependent upon chronic inflammation of the circumference of the brain. This happens to men more frequently than women, and especially in cases that have already passed into dementia. Impaired action of the tongue, causing the articulation to become difficult, is usually the first sign of impaired action, after which the muscles of the inferior extremities partake of the difficulty, so that the gait becomes unsteady, and perhaps after an elapse of months, the patient is unable to preserve an erect posture, and he is compelled to remain seated, or in a horizontal posture all the time. The parts subjected to pressure under such circumstances, become irritated, and gangrenous blisters will form, establishing an irritation that may fatally implicate the vital organs. *Calmeil* has stated the mean duration of the paralysis to be thirteen months, and that it rarely happens that recovery takes place.

*Causes of mental alienation.*—There is no doubt but that a constitutional predisposition to insanity exists, either hereditary or original, from the fact that the application of the same exciting causes will induce it in some that will have no such effect upon others. It has been observed that persons born after insanity has been developed in their parents, are more subject to the disease than those born before, and that where such hereditary disposition exists, the disease is liable to appear in the different members of a family at a particular period of life.

Andral mentions the fact, that children have become affected from a powerful emotion experienced by the mother during utero-gestation, and in consequence have become predisposed to insanity at the age of puberty.

Mental imbecility is common before the age of puberty, but mental alienation seldom occurs till after. It has been observed, that insanity is most frequent between the ages of thirty and forty, and a greater proportion of females than males are thus afflicted.

The influence of previous attacks is one of the most powerful predisposing causes, and most commonly after one attack, the individual is more liable than before. There have been rare cases, however, that after repeated attacks of insanity, the predisposition has been lost.

An elevation of temperature has an injurious effect upon insane persons, and the summer is more exciting to them than cold weather, and besides it is known that heat may operate as a cause of the disease. It has been observed that recruits predisposed to insanity, when drafted for service in the torrid region, are in most instances, subject to a development of the disease. The number of admissions in the Insane Asylums, it has been observed, are much greater during the heat of summer than in winter.

The idea was formerly cherished, that the influence of the full moon was detrimental to the insane, and on this account they received the appellation of *lunatics*, and insanity became designated by the term *lunacy*, and light often proves exciting to the insane, and this is likely to be the case at the full of the moon and at the break of day. The stimulus of light frightens some, pleases others, and agitates all, and this will account for the insane being more agitated at the full of the moon than at other periods. *Coup de soleil*, or sun stroke, has been assigned as a cause of madness, but by no means common. Injuries of the head sometimes induce mania, but not suddenly. Misfortunes of the kind more frequently cause inflammation of the brain, as the immediate consequence; and when mental alienation does supervene, it is not usually until the lapse of considerable time after receiving the injury. Intemperance, it is thought, may prove an indirect cause of mental alienation, by inducing previous states, that favor the development of the disease. The excessive use of prostrating drugs, may so tax the vital energies of the economy, as to shatter the nervous system, and bring on insanity. Excessive venery has not only been reckoned among the causes of insanity, but, also, as one of the prominent causes of dementia. Sudden suppression of the catamenia, pregnancy, undue lactation, and even celibacy, have been included among the causes of mental alienation. Various diseases of the brain may have this deplorable result. Violent mental emotions, misery, and great calamities, are well known causes, and to these we may add, as occasional causes, care, anxiety, passions, appre-

hensions relative to salvation, indigestion and diseases of the intestinal canal, loss of blood and many other circumstances.

Idiocy is common in Norway and in the mountainous countries generally, owing, it is believed, to the absence of society, while, on the contrary, mental perversion is the product of society and of intellectual and moral influences. In idiocy, causes have interfered to interrupt the development of the organs. In madness, the brain being over excited, has transcended the normal boundaries.

Locality may have some influence in the production of certain forms of insanity, as well as in the generation of other forms of disease, but it is doubtful whether a mountainous country is more unfavorable in this respect than one more level. It is said, that in Wales, which is unusually mountainous, and Italy, which is traversed by ridges, the proportion of the insane is very small.

*Cretinism* is one of the most striking instances of idiocy induced by locality. This seems to be a species of fatuity connected with personal deformity, and is known to exist in the mountains of Switzerland.

Almost any serious derangement, or even torpidity of the digestive tube, is likely to produce some form of insanity, but most commonly that of hypochondriasis.

Diseases of the pulmonary organs, on the contrary, may not give rise to cerebral disturbances,—the intellect may continue unclouded until within a very limited period previous to dissolution.

*The Pathology of Mental Alienation*, has enlisted the attention of the most critical observers. Pinel, and others, after many examinations of the dead, came to the conclusion, that no lesions were discovered, calculated to throw any steady light upon the true nature of the disease. More modern observers, have maintained that the brain presents alterations which may be detected by pathologists—and these alterations differ according as the disease is acute or chronic, and with the nature of the symptoms, whether they pertain to the intellect or otherwise. That insanity is a purely nervous disease upon which pathological investigations can throw but little light, is indeed probable. The vital forces of the brain may become deranged without the supervening of any alteration of structure, that can be detected. It is known that both acute and chronic inflammations of the viscus may take place, and it seems probable that the latter may be the sequel of the former, and be the primary

physical cause of insanity. Some writers have maintained that disease in some other locality may establish an irritation by metas-tasis in the cerebral convolutions. Post mortem disclosures have utterly failed of establishing the truth of these propositions and we are still left to conjecture as to the pathological condition of the cerebral hemispheres, attendant on mental alienation.

There are, however, some appearances, that have been described, worthy of attentive study; they may be regarded as letters in the alphabet, that may ultimately come into use in throwing light upon the subject.

*Foville* and *Pinel*, have each recorded the result of his observations on the vesicular matter, viz:—that it is injected, of a deep red color and preternaturally soft—that the membranes are opaque and covered with serum lymph or pus. The bones have been found, in some cases, unnaturally indurated and thickened, and in other cases they have presented a kind of atrophy in which the diploe had disappeared, allowing the external plate to crowd upon the internal, so as to present a manifest depression externally. But even if these appearances are confirmed, an interesting question might arise as to whether they are to be regarded the organic cause of insanity or the effect.

The *morbid appearances* of the brain, in cases where persons have died, demented, are better confirmed. Paleness of the viscous, as if from the absence of blood, has been well confirmed—a collapsed condition of the convolutions, has also been observed—sometimes indurated, at others softened.

In congenital idiocy, the convolutions are seldom developed and some of the constituents of the brain in its healthy condition are believed to be wanting. The brain is classed among the albuminous tissues, and when normal the fact that it contains a definite proportion of phosphorus and sulphur, would argue that its health would cease, if either of these were wanting or deficient. Vauquelin's chemical analysis of the brain, in numerous instances, disclosed the interesting fact, that the due proportion of phosphorus and sulphur, was essentially wanting in the brains of idiots. And it is not improbable but that acute encephalitis, such as occurs in malignant cases of scarlatina may diminish the quantity of these essential ingredients, and be one cause of the dementiae that is sometimes witnessed in the cases that recover.

The researches of Esquirol, present many interesting facts with regard to the shape of the skull, as having some relation to the intellectual faculties; but though these researches have been great, they may not have accomplished, as yet, anything remarkable, by way of elucidating the relations which these malformations may have to disordered intellects.

*Treatment.*—Insanity was regarded in the earlier ages, an awful dispensation of the Almighty, entirely out of the province of medicine, but in more modern times, it has been regarded a disease, that may often prove curable under a proper course of treatment. Since the attention of philanthropists have been turned to the insane, much has been accomplished of a praiseworthy character, in providing for the proper treatment of this unfortunate class.

Asylums have been provided in all christian countries, that have been the means of exerting a beneficial influence, and in the United States the results have been very encouraging. A very great proportion of the *lunatics* admitted into these asylums, have been cured; but whether by any therapeutical treatment that has been brought to bear, is exceedingly doubtful. But little opportunity has been presented for testing homœopathic treatment in these cases. All the asylums have been, and still are, under the direction of allopathic practitioners. In private practice, however, many cases have received homœopathic treatment, and it is believed, with salutary results. The moral treatment that has been provided in connection with asylums, has undoubtedly proved of the utmost advantage, for it must appear reasonable that insane patients surrounded by a combination of circumstances, in every way calculated to favor the recuperation of the physical powers, and at the same time well adapted for the training of the moral and intellectual faculties, are placed in a better condition for receiving benefit than they otherwise would be, if left unprotected and exposed.

The most reasonable course of treatment is that which may be divided into the *moral* and *medicinal*.

The *moral treatment* relates to the management of the insane by secluding them from such influences, as appear to be unfavorable to their mental condition, and this, it must be admitted, can better be accomplished by placing them in appropriate seclusion, in some well regulated asylum, than by leaving them to the care of relations or servants at home.

There may be cases, however, in which patients are attached to their homes, and relations and associates, to a degree, that secures to them sufficient reason to prevent them from violent outbreaks. Such cases may not be benefitted by forcibly taking them hence; great caution should be exercised in cases of the kind, and regard must be had to the manifestations in all cases, both of mania and monomania. But in a large majority of cases, the maniac detests his nearest and dearest relatives and friends, and it becomes essential, both for his protection and recovery, as well as to secure the safety of others, that he should be placed in an asylum.

In every well regulated insane establishment, the patients are classified. The furious should be separated from the more peaceable, and those who are convalescent should be allowed a secluded quarter of their own. The very violent should be so secluded and restrained, as to subdue their turbulence, if possible without the strait jacket or chains,—for these shackles, too often prove baneful in their influences, and excite and infuriate the unfortunate victims. It is now a well settled principle, that the insane should never be harshly treated—firmness, and the absence of everything like temper on the attendant, are absolutely indispensable, and this course, it has been found, rarely fails of tranquillizing the most furious and malevolent. In all cases, however the maniac and monomaniac should be so well guarded, as to be continually under the observation of the keeper. The entire abolition of all personal restraint, in the management of the insane, has of late been found entirely effective. To accomplish this a most rigid system of constant superintendence is necessary—the attendants should be humane and mild, and always ready to speak a kind and soothing word, and moreover to seek for pleasing subjects to interest the minds of the insane, when practicable. The results of this course of treatment have been highly satisfactory in many of the most prominent insane institutions in this country, France and England.

In cases where corporeal restraint cannot be entirely dispensed with, it has been found useful to place the patient by himself under as favorable circumstances as possible, and in the best possible situation for him to receive all the kindness that can be bestowed upon him.

This kind of discipline for the insane, it is believed, has been salutary in many cases, without even a resort to medicinal treatment

at all, and all systematic efforts to induce a mental occupation of any kind to prevent insane ideas from intruding, must favor the convalescence of the patient. By carefully studying the mental characteristics and inclinations of patients, it is probable, that nearly all may be provided with labor or amusement, that will exert the most beneficial influence. Some may delight in agriculture, some in horticulture, some in the work shop, some in music, some in reading pleasing stories, or narratives—all these classes should be provided with occupation in accordance with their tastes—for the very one provided requires the attention, in such a way, as to produce a moral revulsion, preventing the topics of hallucination from engrossing the mind. Statistical reports are sufficiently abundant to prove the salutary influence of this kind of training for the minds of the insane.

It has been found impossible to benefit monomaniacs, by trying to reason them out of their peculiar notions; all arguing with them should be avoided. Whatever insane idea the monomaniac may possess, should be indulged; as for instance, when one fancies, that some live animal is in him, a counter impression may be made, by pretending to subject him to a process for its removal. Esquirol, mentions the case of one who fancied he could not void his urine, on the account of producing a second deluge, but he was prevailed upon, by being told that the town was on fire, and that he could save it from destruction, by allowing his urine to pass from him. Other interesting cases of the sort are recorded, showing the necessity of refraining from contradiction, while at the same time, a judicious course, apparently favoring the insane idea, may prove effectual in curing the difficulty.

It is impossible to point out the precise course to be pursued in the moral treatment of the insane, under all cases. Much must be left to the discretion of physicians.

The *moral treatment* of those suffering from *Dementia* and idiots<sup>1</sup> has of late years attracted the attention of philanthropists.—That the mind can be improved by culture, is a fact universally admitted. A systematic method of training or cultivating any degree of mental endowment that may exist in the idiot, it is probable, may contribute to his improvement, if not to his entire restoration. Mr. Richards, in his school for idiots, has demonstrated that a vast amount can be accomplished by bringing into action in a methodical manner, the most obscure minds of the idiotic class.

## MEDICAL TREATMENT OF THE INSANE.

After the most judicious moral treatment has been brought to bear upon the insane, a resort to remedial agents in the form of homœopathic medicines may have a beneficial effect; but certain conditions of the physical system have to be noted, in precisely the same way as in persons of sound mind.

The remedies for the most part employed in the homœopathic treatment of the insane, are *Aconite*, *Agaricus*, *Antimonium*, *Argentum*, *Arnica*, *Arsenicum*, *Aurum*, *Belladonna*, *Calcarca*, *Camphor*, *Cannabis*, *Cantharis*, *Carbo animalis*, *Chamomilla*, *Cicuta*, *Coccus*, *Conium*, *Crocus*, *Crotalus*, *Cuprum*, *Digitalis*, *Dulcamara*, *Hyoscyamus*, *Kali carb.*, *Lachesis*, *Lcdum palustre*, *Lycopodium*, *Mercruius*, *Mezereum*, *Moschus*, *Natrum muriaticum*, *Nux moschata*, *Nux vomica*, *Opium*, *Phosphorus*, *Phosphoric acid*, *Platina*, *Pulsatilla*, *Rhus tox*, *Silicea*, *Stramonium*, *Sulphur* and *Veratrum*.

This may seem like a long list of remedies, but a little reflection will serve to render it probable in every one's mind, that many remedies will be required to meet the various deranged conditions of the insane.

*Aconite*, when there is fear of death, anguish with apprehensive and trembling state of mind, and bitter wailing; great tendency to start, sensitive and irritable mood, alternations of merry singing, or warbling and whining mood, raving and gesticulation, especially at night.

*Agaricus*, when there is no disposition to talk. Timorous craziness.

*Antimonium c.*, when there is loathing of life, with disposition to shoot or drown one's self.

*Argentum*, noisy mania and craziness, hypochondriasis, gloominess.

*Arsenicum*, excessive anxiety and restlessness driving one to and fro in the day time, and out of bed at night, especially in the evening, after lying down; dread of being alone, fear of death, or mania of suicide, crazy.

*Arnica*, hypochondriac anxiety, frivolity.

*Aurum*, melancholy, irresistible desire to weep, anguish increasing into suicide, despair of one's self and others, disposed to grumble and quarrel, vehement and disposed to fly into a passion.

*Belladonna*, raging mania, head-strong, hypochondriac, lowness of spirits, anguish and restlessness, tremulous despondency, disposition to escape.

*Calcarea*, vehement and irracible with disposition to censure and find fault, weeping mood, anxiety, tendency to start, out of humor obstinate, aversion to others.

*Camphor*, whining anxiety, disposition to quarrel.

*Cannabis*, mania, at times merry, at others serious, and at others raging.

*Cantharis*, whining, and low spirited, great restlessness, rage with cries, barking, striking, hydrophobic mania.

*Carbo animalis*, full of fright in the evening, tendency to start.

*Chamomilla*, when there is great moaning and tossing about, vexed and whining mood, with crying.

*Cicuta*, mania with dancing, laughing and foolish gesticulation.

*Coccus*, melancholy, sad, reverie after being crossed, apprehensive anguish, fear of death, disposition to feel offended.

*Conium*, hysterical mania, characterized by anxiety, out of spirits, hypochondriac indifference, indolent and discouraged, vexed and irritable, confused thoughts with mania.

*Crocus*, merry gesticulating mania with pale face, vehement, angry, alternate harshness and kindness of disposition, forgetful and absent minded.

*Crotalus*, when there is lowness of spirits, with indifference to every thing, anguish and restlessness, melancholy, quarrelsome.

*Cuprum*, for fits of craziness characterized by thoughts about some imaginary business, or by merry singing or sullen, and trickey disposition, generally accompanied by quick pulse, red inflamed eyes, wild look and followed by sweat; rage, confusion of ideas.

*Digitalis*, when there is anguish, especially in the evening with whining mood, apprehensions for the future.

*Dulcamara*, when there is internal uneasiness and nightly delirium, impatience and disposition to dispute without being vexed.

*Hyoscyamus*, when there are distress and dread of men and disposition to escape during the night, inclination to laugh at everything, loquacious and given to jealousy.

*Kali carbi.*, when there is tendency to start, and an irritable mood.

*Lachesis*, for crazy jealousy, faultfinding, malicious, nightly de-

lirum, mental alienation after chagrin, or after excessive studies, religious mania.

*Ledum palustre*, when there are misanthropy, peevishness and ill humor.

*Lycopodium*, when there are obstinacy and impeded activity of the mind.

*Mercurius viv.*, when there are obstinacy, impatience and mania, illusions of the fancy, delirium, mental alienation of drunkards.

*Mezereum*, when there is ill humor, dullness of intellect, frequent vanishing of ideas.

*Moschus*, for hypochondriasis with palpitation of the heart; stupefaction as if intoxicated.

*Natrum muriaticum*, when there are apathy, vehemency, and alternations of good and ill humor.

*Nux moschata*, when there is disposition to laugh at every thing, alternations of seriousness and laughter.

*Nux vomica*, anguish and restlessness, frequently attended with palpitation of the heart, and mania of suicide, irritable, artful, malicious, and quarrelsome, mania from drunkenness.

*Opium*, tendency to start, illusions of fancy, mania with strange fancies, rage.

*Phosphorus*, anxious and uneasy when alone; hypochondriac, loss of shame, dread of labor, irritable.

*Phos. acid*, Sad, anxious for the future, apathy.

*Platina*, mental derangement after fright or illness.

*Pulsatilla*, depression of spirits, dread of company, whimsical, especially suited to persons of mild disposition and females.

*Rhus tox.*, when there are mania of suicide, illusions of fancy, and mental alienation.

*Silicea*, when there is want of cheerfulness, fixed ideas upon some unimportant point, gloominess, careworn countenance.

*Stramonium*, when there is melancholy, hurried movements, loud laughter, indomitable rage and mania, with an inexhaustible variety of fanciful visions, lascivious talk, conversation with spirits, affectation of proud and haughty manners, dancing, constant alternatives of ludicrous gesticulations and sad, serious gestures.

*Sulphur*, when the patient is obstinate, irritable, peevish, fretful, or full of fancies, philosophical and religious, and when the mania is

such that the patient fancies himself in possession of all sorts of beautiful objects.

*Veratrum*, mental alienation with singing, moving about to and fro, having the appearance of much business, laughing, whistling; sometimes violent and ill-humored.

In the medical treatment of the insane, the general condition of the nutritive functions has to be noted as well as that of the animal functions, and the same rule may be observed in the prescribing remedies for the insane, as for the sane in this respect. If there is fever, indigestion, disease of the kidneys, or any other functional derangement, the same remedies may be required, without regard to the mental alienation as in other cases.

**DIET AND REGIMEN.**—The diet of the insane should be plain, without excitants, such as stimulating condiments, malt liquors, wines or alcoholic beverages in general; coffee should be prohibited as well as tobacco, opium, and other agents that excite or depress the nervous system; freedom of exercise in the open air as well as judicious bathing, should be encouraged.

**MEDICAL TREATMENT FOR LOSS OF MIND, IMBECILITY.**—The following remedies may be consulted:

*Anacardium, Argentum n., Belladonna, Calcarea, Helleborus, Hyoscyamus, Lachesis, Opium, Sepia, Sulphur, China.*

*Anacardium*, when there is an awkward and silly demeanor, laughing at serious things, weakness of memory and mind, inability to collect the ideas.

*Argentum nit.*, suitable for persons that have become imbecile from epilepsy, when there appears to be absence of thought, as if stupid, foolish demeanor, silly laughing and murmurs, with appearances of grimaces or closing the eyes in the day time.

*Belladonna*, when imbecility has supervened upon an attack of insanity, when there is forgetfulness, absence of thoughts, confusion of ideas.

*Calcarea carb.*, when there is loss of mental consciousness, obstinacy, thoughtlessness, and when the imbecility has resulted from intemperance, which has first produced *mania-a-potu*, and a talking about dogs, rats and mice.

*Helleborus*, dulness of the inner sense, dulness of sense, with thoughtless staring to one point, weak memory, imbecility, after an acute attack of scarlatina, or attending a dropsical diathesis.

*Hyoscyamus*, congenital imbecility, or lascivious mania and ludicrous gesticulations, loss of memory, does not recollect any thing, no power to direct the thoughts, absence of ideas.

*Lachesis*, weak memory, forgets that which is just spoken, mistakes the time, mind worn out with study.

*Opium*, congenital idiocy, when there is complete stupification, loss of mind from intoxication.

*China*, when there is loss of mind, occasioned by loss of blood or debility.

*Sulphur* and *Sepia* are remedies that may have a beneficial effect in dosage attendant upon old age.

When the cause of mental imbecility is known, this may have some bearing in the selection of a remedy, as for instance, when arising from scarlatina, *Sulph.* and *Phos.*; when occasioned by a blow, or concussion of the brain, *Arnica*.

The condition of the system has to be noted in the adaptation of a treatment, for, aside from the imbecility, the symptoms of diseased action may be precisely the same as in ordinary cases, and this fact would argue the propriety of resorting to the same kind of treatment, or rather to the same remedies as are ordinarily found serviceable in common deranged conditions.

For the treatment of that kind of imbecility common to old age, nothing proves more advantageous to the patient than the utmost care and attention to his wants when he suffers from an attack of a cold, administer for his relief, when from diarrhoea pain in the head, or any local suffering whatever, administer such remedies, as will prove most likely to relieve him.

DIET.—The diet and regimen for idiots and those suffering from imbecility, must be plain and nutritious, rich gravies and fat meats, must be avoided, fruits may be allowed *ad libitum*. Ablutions at regular seasons are to be commended, as well as judicious bathing, when there is no physical infirmity that would render it improper.

#### HYPochondriasis.

This difficulty, for the most part, is classed among the neuroses as an affection separate and distinct from what we have been considering. But, in strict propriety, it cannot be separated from mental alienation. Without doubt it is a form of monomania—at least it has been so regarded by nearly all the modern writers upon

the subject. There are, however, some who are still disposed to class it with dyspepsia, with which it is undoubtedly often associated.

In our former article, allusion was made to hypochondriacal monomania, where the subjects imagined they had some live animal within them. It is characteristic of monomaniacs to have the mind fixed upon some imaginary difficulty which they dread, and this being the ever present, characteristic of hypochondriasis, would seem to argue the propriety of regarding the disease as being identical with that form of mental alienation termed monomania.

This kind of monomania, however, consists of a constant dread of diseases conjured up by the imagination, the most melancholy forebodings, as well as the most painful attention to real sufferings, which very frequently are of the most trifling character.

During the prevalence of some fearful endemic disease—such as cholera or yellow fever—it has been observed that a certain class of persons becomes fearfully alarmed, and they appear to be constantly anticipating an attack; and whatever ailment befalls them, however slight, they are apt to magnify it into that form of disease which they so much dread. Some become afflicted with the dread of hydrophobia, and become mad upon the subject; others really believe themselves in constant danger of some other fatal malady. Many singular examples of the *hydrophobic mania* have been recorded. The following has been recorded as a veritable fact:—two brothers were bitten by a rabid dog at the same time in England. One of them set off for America soon afterwards, where he resided for twenty years. After this he returned to his native country, and on learning that his brother, who had been bitten at the same time with himself, had died with every symptom of hydrophobia, his imagination became so wrought upon that he died soon afterwards with similar symptoms.

The symptoms of hypochondriasis are astonishingly diversified, and for the most part exist along with the healthy play of various functions. At other times there is considerable functional disease. There may be disordered digestion, a torpid action of the liver, or some derangement of the functions of some of the other organs, whereupon the fears of the patient overcome his reason, and he imagines the most trivial symptom to be of the greatest moment. A slight flatulency, or distension of the stomach or abdomen may amount, in his imagination, to a positive inflammation of the most

serious character, working great mischief in the abdominal viscera. The slightest irregularity in the movement of the bowels, or the slightest modification in the character of the evacuations, may occasion him the greatest anxiety, and dread of some impending disease of a more formidable character, or perhaps of death, which he imagines is staring him in the face. In this way he is made perpetually miserable.

Nothing has been elicited from morbid anatomy at all calculated to throw any light upon the nature of this malady, but from the phenomena that usually attend it, the conclusion has been arrived at, that some inappreciable morbid change in the encephalon is the immediate cause of the disease.

TREATMENT.—This of course must be based upon the same principles laid down under mental alienation. At the commencement, the treatment must be moral, but it is to be borne in mind, that it is not best to rudely contradict the patient's notion concerning his bodily diseases. It is believed to be better to fall in with them, and prescribe for their removal. Exercise in the open air, riding on horseback, and especially the exercise afforded by travelling, and coming in contact with different scenes, that new impressions may be constantly engendered, are to be commended; gymnastic exercises are also advisable when the patient's general health is such as to admit of them. It is a well known fact that the hypochondriac is averse to all exertion, and if left to his own inclination, he would dwell upon, and brood over his imaginary evils, and thus render his ideas more decidedly confirmed, and, of course, more difficult to eradicate. But by efforts of a judicious character, he may be induced to move about, to go from home, or to engage in harmless amusements that give exercise to the body, and, at the same time, afford mental occupation of a buoyant character.

There is not much that can be offered concerning the moral treatment of this unfortunate class of patients; it is a question properly belonging to the physician, who will find it necessary to use his tact and his powers of perception so as to understand how to modify his proceedings so as to meet the different characters of those he has to treat; the physician is thrown wholly upon himself, and that, too, in a moment; when he comes into the presence of a hypochondriac he will be interrogated by the patient upon subjects of the most delicate nature. The physician must be philosophical in his treat-

ment of such cases, or otherwise he may not have sufficient adroitness to gain an influence over a mind that is disturbed, suspicious, and irritable, so as to have any beneficial effect. The really morbid phenomena that may manifest themselves in the hypochondriac, may indicate the employment of remedial agents to meet each individual case. It is believed that homœopathic remedies may be selected for given cases, in accordance with the symptoms manifested.

For diseases of the stomach in hypochondriacs, *Nux vomica*, *Coccus*.

FIXED NOTIONS.—*Anacardium*, *Aurum*, *Belladonna*, *Cicuta*, *Cuprum*, *Hyoscyamus*, *Ignatia*, *Lachesis*, *Stramonium*.

FOREBODING OF DEATH.—*Belladonna*, *Lachesis*, *Nux vomica*, *Platina*, *Zincum*.

FOR ILLUSORY NOTIONS IN GENERAL.—*Aconitum*, *Arsenicum*, *Belladonna*, *Hyoscyamus*, *Lachesis*, *Mercurius*, *Moschus*, *Nux vomica*, *Pulsatilla*, *Stramonium*, *Sulphur* and *Veratrum*.

If the patient fancies he is abandoned.—*Carbo animalis*, *Stramonium*.

If haunted with the idea of being a criminal.—*Hyoscyamus*.

If haunted with the idea of ghosts or demons.—*Arsenicum*, *Belladonna*.

If insane upon the condition of his stomach, imagining that it is ulcerated or corroded.—*Ignatia*, *Sabadilla*.

For melancholy in general.—*Arsenicum*, *Aurum*, *Helleborus*, *Lycopodium*, *Pulsatilla*, *Silicea*, *Sepia*, *Sulphur* and *Veratrum*.

For low spirits.—*Bryonia*, *Calcarea*, *China*, *Natrum*, *Sulphur*.

For RELIGIOUS MANIA.—*Belladonna*, *Crocus*, *Hyoscyamus*, *Lachesis*, *Lycopodium*, *Pulsatilla*, *Stramonium* and *Sulphur*.

Hypochondriasis may be attended with so great a variety of symptoms, that it would be impossible to enumerate all its phases, and the remedies applicable to each. The mind may become fixed in any imaginable idea, and whatever its nature may be, the corresponding remedy may be suggested.

The diet for hypochondriacs should be carefully selected to meet the condition of the digestive organs. All stimulants should be prohibited, especially those that only afford a temporary exhilaration of the animal spirits, for a corresponding depression will invariably follow their use.

## DISEASES OF THE NERVES.

The diseases that affect the nerves so as to produce sensible modification of structure, as well as of function, afford something more tangible than the neuroses that we have been considering.

## INFLAMMATION OF THE NERVES.

When the nerves are the subject of inflammation, the fact may be known by constant pain increased by pressure on the affected part; the pain may be augmented when the nerve is inflamed, but it does not occur in paroxysms, as it does in neuralgia. When any nerve is so situated that its course can be traced, the pain, in case of inflammation may be aggravated by pressing along the affected nerve, and the parts to which the nerve may be distributed become variously affected; muscles may become convulsed or paralyzed. There may be loss of vision, and of the sense of hearing, if the optic and auditory nerves are the seat of inflammation. Andral says, that inflammation of the *pneumo-gastric nerve* gives rise to whooping cough, or acute gastritis. The disease may either be acute or chronic.

*Causes.*—Neuritis may be induced by external violence, as by bruises or puncture; sometimes it supervenes upon surgical operations; bloodletting has sometimes given rise to the difficulty, but at other times it makes its appearance from causes within the system, which cannot be explained.

*TREATMENT.*—When a nerve has been injured by puncture or bruise, the application of a dilute tincture of *Aconite* or *Hypericum* to the part may prove of service.

*Aconite* may be administered internally when the inflammation is violent, and when there is reason to believe that the nerve may be affected with hyperæmia, *Belladonna*, *Arnica* and *Hypericum* may be administered internally when the inflammation arises from a mechanical difficulty; but when it arises from causes within the economy, *Belladonna*, *Cicuta* or *Conium*, may be administered after *Aconite*.

## NEURALGIA, OR PAIN IN THE NERVES.

This disease, commonly termed *tic doloureux*, is one of the most painful to which humanity is subject. It consists essentially of a

more or less acute, exacerbating, or intermittent pain, seated in the nerve, and shooting along its ramifications.

*Symptoms.*—The pain in neuralgia, in a majority of instances, occurs suddenly, though sometimes there is a slight sensation of itching, or of heat, or creeping numbness in the part, which in a gradual manner becomes more and more intense.

Then again, the paroxysm of neuralgia is preceded by a feeling of coldness and numbness, the pain for the most part is exceedingly acute and lancinating, taking place instantaneously, and extending along the nerves like an electrical shock. When the pain is at its height, it seems as if burning needles were thrust into the effected parts, after a time the agony diminishes, and is alternately succeeded by a sense of numbness, which remains until the pain returns. Exacerbations and remissions of pain take place at intervals until, alternately, the suffering becomes so that it can be endured, which was hardly the case when it was at the height of the paroxysm.

When the affected nerves are distributed to muscles slight twitchings will be observed in them, when the pain is protracted and severe, the heart and arteries may sympathize and beat with more force than usual, which is the result of suffering.

If the diseased nerve is distributed to secreting organs, their functions may become impaired, the permanent agitation of the muscles may give rise to involuntary catchings, which the French term *ties*, whence the name *tic douloureux*.

When the pain continues for a long time, it must inevitably give rise to constitutional disturbances, affecting the nutrition of the whole body, and the patient may become worn out and die of exhaustion. These extreme cases, however, are of rare occurrence.

It may be said of most cases, that a cure may be wrought by time and the employment of appropriate remedies; relapses are common until the habits of the body become such as to overcome all predisposition for them to return. During sleep, if the patient is fortunate enough to attain this state, his sufferings are usually suspended, the duration of the disease is uncertain, it may be ephemeral or it may last for months and years. Cases of cure are recorded where the patient had been afflicted for ten or twelve years.

Neuralgia has received several names, according to its locality. It is termed *facial neuralgia* when the pain is felt in the frontal or supra orbital region, infra orbital and maillary regions. The *infra*

*orbital* has received the name *tic dououreux*. It gives occasion at times to twitchings of the lower eye-lid cheeks and upper lip, and to agony almost beyond endurance.

Dental neuralgia is a form of *toothache*, but takes place when the teeth are apparently sound, with shooting along the jaw and along the nervous ramifications, so as to endure the extremest suffering.

Neuralgia sometimes affects the trunk following the course of the intercostal nerve, and hence is termed *intercostal* neuralgia; at other times it is seated in the parieties of the thorax, and hence termed thoracic neuralgia. It occasionally attacks the female mamma, so as to induce the suspicion of the existence of cancer, this is termed *mammary* neuralgia. One of the severest forms affects the nerves of the spermatic cord and the testes, extending to the nates and thighs, implicating the bladder, so as to give rise to frequent micturition, the *ileo scrotal* neuralgia descends from the lumbar region along the psoas magnus to the scrotum.

The nerves of both the upper and lower extremities may be equally affected with this disease, but it is more frequently met with in the latter. The *sciatic* neuralgia extends from the sciatic notch along the back part of the thigh to the ham, and thence it sometimes extends to the foot. It is frequently met with, in a slight degree during pregnancy.

These varieties, have, it will be seen, received special names, and without doubt many more might be enumerated.

There is a variety sometimes termed *false* neuralgia, occasioned by pressure upon a nerve, which will disappear when the pressure is removed.

Tumors in the pelvis may occasion pain along the sciatic nerve. Cases have been met with where syphilitic periostitis has produced the affection, as has been abundantly proved by relief being procured on the administration of mercury.

*Causes.*—The causes of this distressing malady are very obscure. There is, however, without doubt, a predisposition to the affection, of the precise nature of which we are altogether ignorant. Persons of a highly impressible nervous system are the most liable to the affection. The disease is altogether neuropathic, although some authors have regarded it an inflammation, or rather an inflammatory action going in the nerve, but all the phenomena of the disease are adverse to the idea, and indicative of sufficient difference to discriminate between neuritis and neuralgia.

Neither very young nor very old persons are prone to suffer from the disease, some very curious differences with reference to age are observable, as respects the different forms of the disease. The infra-orbital is most commonly met with in adults, but in the aged the femero-popliteal is more frequently observed.

Some authors have supposed that females are more susceptible to the disease than males, but this assertion fails of receiving that confirmation which is reliable, giving it the coloring of a fact. Both sexes appear to be equally subject to neuralgia of the face, while the sciatic neuralgia more frequently attacks men than women. When the system is very susceptible, as in some persons the most trivial circumstances may bring on an attack, a cold, moist wind, and sometimes the slightest breath of air may develop facial neuralgia of the most excruciating character. Even the touch of the razor will sometimes excite the most tormenting pain. In a state of predisposition to other forms of neuralgia, damp and cold may often prove the exciting causes than other circumstances. External injuries may cause neuralgia as well as neuritis. Though some maintain that neuritis always results from external injuries. The healing up of an old ulcer and leaving a cicatrix, it is said has occasioned neuralgia, and also when a patient has once suffered from the disease, almost any exertion, bodily or mental, may bring it on, if indulged in to excess.

Some of the most distressing cases of neuralgia on record have been caused by wounds, and frequently the pain may be experienced in the sentient extremities of nerves, at a considerable distance from the injured portion. And not unfrequently when we can find no cause near the seat of the pain, we may find some source of irritation distinct in the trunk of the nerve. Severe losses may predispose the system to neuralgia, such as happen from miscarriage, or any other cause that detracts from the nutrition of the system.

Morbid anatomy throws no light upon this disease that is at all worthy of attention, as all that has ever been elicited from post mortem appearances is rather of a negative than of a decisive character; doubtless there is some molecular change in the substance of the nerve, but not such as to indicate anything with reference to treatment. All that serves as a guide in treatment are the symptoms of each individual case.

TREATMENT.—The homœopathic treatment of neuralgia requires

the following group of remedies: *Aconite*, *Arsenicum*, *Aurum*, *Belladonna*, *Bryonia*, *Calc. carb.*, *China*, *Colocynthis*, *Lycopodium*, *Pulsatilla*, *Platina*, *Sepia*, *Spigelia*, *Sulphur* and, some others.

*Aconite*, when there is redness and pain in one side of the face, or pain in the teeth or maxillary region, without the presence of any decayed teeth.

*Arsenicum*, when there is apparently a periodicity in the attacks, and the pains are of a burning, pricking and rending character, and are experienced around the eyes, and occasionally in the temples, aggravated by cold, and temporarily relieved by heat.

*Aurum*, when the pains appear to be in the bones, and particularly when they occur after the excessive use of mercury or blue pills.

*Belladonna*, when there are darting pains in the cheek bones, jaws, nose or temples, or in the neck; twitches of the eyelids, and excruciating pain in the ball of the eye; for almost every form of face ache this remedy seems adapted.

*China*, when there is a tendency to periodicity in the attacks, and when there is extreme sensitiveness of the skin, and particularly when the disease has occurred after the system has become weakened by losses of blood, or acute disease.

*Calc. carbo.*, when there are twitchings of the lids, pressure in the eyes, tearing pains in the facial bones, pain in the teeth after taking a draught of cold water, or from exposure to a draught of cold air, digging pain like a sore, and beating.

*Colocynthis*, when there are violent rending and darting pains, which chiefly occupy the left side of the face, aggravated by the slightest touch, and extending to the head and temples.

*Lycopodium*, when the right side of the face seems to be the most affected, and also when there is a torpor and creeping pains extending towards the head and temples.

*Pulsatilla*, for facial neuralgia when there is a feeling of coldness, and torpor in the affected side of the face, with severe spasmodic pain in the cheek bone, with a sensation of crawling and aggravation or renewal of the suffering in the evening, and when in a state of rest; also when there are lacrymation, redness of the face, &c.

When neuralgia attends other difficulties, such as *prolapsus uteri*, *Sepia* and *Aurum* are worthy of attention. Neuralgia of the sciatic nerve may require the use of *Belladonna*, *Calcarea*, *Mercu-*

*rius* or *Sulphur*. That which affects the lower extremities, *Bryonia*, *Rhus toxicodendron*, *Spigelia*, *Zincum*. *Spigelia* is also a useful remedy when the pain extends into the head, and is excruciating, aggravated by the slightest touch. For neuralgia of the skin, *Mercurius*. When there are acute and dragging pains in the hip joint, and a sensation of coldness in the part affected, and also when the pains appear to return periodically, *Arsenicum* is the remedy to be consulted. When the pains are aggravated at night, *Chamomilla*. When seated in the right hip, *Colocynthis*. When there are cutting pains on the slightest movement, *Ignatia*. When there is a sensation of stiffness of the limb, or sensation as if the limb were contracted, torpid or paralyzed, *Nux vomica*. *Rhus toxicodendron* is better suited when rest aggravates the suffering, and motion and warmth mitigates it. *Bryonia* is a good remedy when the neuralgia is in the right, upper and lower extremity.

**DIET AND REGIMEN.**—Patients suffering from neuralgia will often have an impaired appetite; the severity and duration of the pain may have produced some constitutional derangement. It is better under such circumstances to subsist upon a moderate diet, and one easy of digestion, and indeed one that will require hardly any labor of the digestive organs. All condiments must be avoided, such as vinegar, pepper, mustard, &c. When the patient's appetite remains, he may allow himself black tea, cocoa, and other non-medicinal drinks. When a warm room alleviates the suffering, it is best for the patient; but if heat aggravates his suffering, a moderately cold room is better. If rest relieve him, let him lie in bed, and if activity and motion contribute to his ease and comfort, let him enjoy them to the full extent.

#### ODONTALGIA.

But little need be said by way of description of this malady, the affection is so common that but few have at all times been exempt from it.

The principal remedies employed to relieve aching teeth are, *Aconite*, *Arnica*, *Arsenicum*, *Belladonna*, *Chamomilla*, *Mercurius*, *Nux vomica*, *Pulsatilla* and *Sulphur*.

*Aconite*, when the toothache is accompanied by fever and heat about the head, and when the toothache results from cold or from nervous excitement.

*Arnica*, when the pain is occasioned by a mechanical injury, as from extracting or plugging.

*Arsenicum*, when cold brings on a paroxysm, or aggravates the pain.

*Belladonna*, when from cold, there is severe pain in the teeth, involving the whole jaw, the pains extending off the side of the face and into the ear, and when the pain is aggravated by hot applications. When produced by coffee, *Chamomilla*, and also when attended by diarrhoea and flushed face, or swelling of one cheek, or when the pain extends into the ear, and worse when in the room than when out in the open air. *Mercurius viv.*, for pains in hollow teeth, worse in the morning; pain in the jaw bones. *Nux vomica*, when the toothache arises from cold, which at the same time affects the head and neck. *Pulsatilla*, suitable for persons of a mild, quiet, timid disposition, or for persons of a fretful temper, or when the toothache occurs in the spring, with earache and headache, and when it attends the menstrual period, and when the pains are of a jerking, tearing, or stinging character, or when cold air relieves the pain, or it is relieved by mastication. *Sulphur*, suitable for jumping pains in hollow teeth, swelling and bleeding of the gums.

When the toothache occurs from pregnancy, *Calc. carb.*, from nursing, *China*, from grief, *Ignatia*, &c. For ulceration of gums, *Mercurius*, *Selicea*, *Hepar sulph.*, *Calc.* and *Sulphur*.

Persons suffering from toothache should avoid holding hot or acrid substances in the mouth, and refrain from the use of Kreasote, oil of cloves, or any agent that interferes with the action of the remedies. When it becomes apparent that any exciting cause will bring on the toothache, it is best to guard against it, as much as possible; when coffee or tea, wine, or other stimulents excite pain in decayed teeth, they should be prohibited.

#### PARTIAL PARALYSIS, OR PARALYSIS OF CERTAIN MUSCLES.

The paralysis that lesions of the nervous centres will produce, and especially that which arises from hemorrhage in the nervous centres, has been already treated of. But there are cases where the muscle or muscles becomes paralyzed, without the possibility of tracing the cause to any morbid appearance on dissection, and yet when the effect has proceeded from some inappreciable cause or change that must have occurred in the nervous centres. We often

find the paralysis confined to a small portion, and frequently it happens that only one muscle is implicated. When this is the case, and there are no signs whatever of any disturbance in the brain, the loss of power may be owing to pressure on the particular nerves that are distributed to the paralyzed muscle. Dislocation of the os humeri, by causing pressure on the circumflex nerve, has caused *paralysis of the deltoid*. In many cases, however, the paralysis of a single muscle is but the precursive sign that betokens the approach of some more serious difficulty; the falling down of the upper eyelid may indicate the approach of apoplexy or of hemiplegia, and the paralysis of one or more muscles of the fingers is at times a premonitory sign of the same difficulty.

The paralysis of one of the motor muscles produces *Strabismus*, such as often occurs in advanced stages of encephalic disease. *Aphonia* appears to be produced in many cases by paralysis of the muscles whose office it is to stretch the vocal cords.

*Paralysis of the tongue* occurs as a symptom of general paralysis and yet it may occur alone from pressure on the hypoglossal nerve.

Sometimes a morbid condition of the nerves distributed to the face will occasion *paralysis of the face*, although the same occurs in or accompanies hemiplegia.

*Paralysis of the rectum* produces a deplorable condition of the patient; a continual involuntary discharge of fæces. A paralysis of the sphincture of the bladder occasions involuntary discharge of urine.

The paralysis caused by lead, and also that attendant upon mental alienation may sometimes occur only in the partial form. Workers in mercury are liable to a form of partial paralysis that effects the muscles concerned in articulation and mastication and sometimes those of locomotion; arsenic when taken as a poison has been known to produce similar results.

*Causes.*—The ordinary causes of partial paralysis are the same of course that produce general paralysis; certain poisons are known to have produced the difficulty. Pressure upon the nervous centres or on that part from whence a nerve may arise that is distributed to a certain muscle may occasion its paralysis—contusions and concussions are among the exciting causes of the disease.

*Partial* paralysis may also be produced by cold acting upon the sentient extremities of nerves, occasioning loss of power in the nerves of the part. It may be brought on by intemperance, excessive sexual indulgence or self-abuse, and by whatever agency that may interrupt in any degree the function of the spinal nerves.

In regard to the prospect of effecting a cure of the various kinds of partial paralysis, much will depend upon the morbid condition. If there is complete destruction of the nerves proceeding to any single part, no cure can be effected; but if there be merely a compressing cause, such as may arise from a tumour, this may be removed by proper treatment. Those instances of paralysis that result from poison by lead or arsenic taken into the system, are, no doubt, curable. That which may result from teething may pass away when the cause subsides. The prognosis depends very much upon the morbific influence, and the length of time the patient has been afflicted. That which has continued for a long time, is liable to resist the effect of remedial means to a much greater extent than recent cases, and much doubt exists of effecting a perfect restoration when the cause is so obscure as not to be recognized.

The experience of the writer in the treatment of several cases of local paralysis, leads him to believe that the effect of homoeopathic remedies is frequently successful.

FOR PARALYSIS OF THE BRAIN, which is denoted by loss of mental and moral manifestation, and an absence of sensation in the part.  
—*Cuprum aceticum*.

FOR PARALYSIS OF THE ORGANS OF SPEECH, *Belladonna* has sometimes proved effectual. In a case occurring after rush of blood to the head, in a gentleman about fifty years of age, *Belladonna* 6th was given in daily doses for ten days without any perceptible benefit. *Sulphur* was then given at night and *Belladonna* in the morning, for four days, which evidently produced a salutary effect; the power of speech was gradually recovered, and at length a complete restoration. In another case, which seemed to occur from no definable cause, where there was complete loss of speech, *Graphites* and *Causticum* had a good effect. In a child ten years of age, who had suffered from an attack of inflammation of the brain and afterwards with loss of speech, *Causticum* and *China* in the sixth ultimatum,

afforded a satisfactory result. The writer has used these remedies, however, in another case without effect, where partial restoration was effected by *Belladonna*.

Several cases of *paralysis of the tongue* have come under the writer's observation, and in one in particular, where the patient was very much prostrated, *China*, in the tincture, was given in drop doses with good effect, although *Belladonna*, *Causticum* and *Dulcamara* appeared to accomplish but little before. If paralysis of the tongue occurs from acute *Hydrocephalus*, *Hyoscyamus* may prove of service; if from suppressed eruption, *Graphites*; if after an attack of epilepsy, *Belladonna* or *Stramonium*. In some cases of long standing paralysis of the organs of speech, and of the tongue in particular, the effects of remedies did not become apparent for some time. In such cases, however, *Causticum* and *Graphites* may be employed. In case of paralysis of one arm, *Pulsatilla*. Miss Mehetable Pancost, aged 39, after a severe attack of vomiting, suffered paralysis of the right arm and hand, *Pulsatilla* given every twenty-four hours effected a cure in little more than a week. In case of paralysis of the lower extremities, *Nux vomica* may prove of essential service. When one side becomes paralyzed, *Causticum*, *Coccus* and *Lachesis* are among the most prominent remedies. If partial paralysis occurs after rheumatism, *China*, *Ferrum* and *Ruta* may be regarded the most prominent remedies of the group to be consulted.

There is no resort but to internal remedies when any of the internal organs become the seat of paralysis,—but friction may be resorted to with benefit when the local paralysis involves some of the external muscles of locomotion, as

PARALYSIS OF THE BLADDER requires the internal administration of *Arsenicum*, *Helleborus*, &c.

PARALYSIS OF THE NECK OF THE BLADDER requires *Arsenicum*, *Bell.*, *Cicuta*, *Dulc.*, *Hyoscy.*, *Lach.*, &c. The *Arsenicum*, *Dulc.* and *Hyos.* being the most prominent of the group.

PARALYSIS OF THE SPHINCTER ANI.—*Aeon.*, *Bell.*, *Hyosc.*, *Laur.*

PARALYSIS OF THE INTESTINAL CANAL.—*Phosphorus*.

PARALYSIS OF THE UPPER AND LOWER EXTREMITIES IN GENERAL.—*Bell.*, *Bry.*, *Coccus*, *Nux vom.*, *Rhus*.—These several remedies may be applied externally as well as internally, in the following way: First, second, or third dilutions, five drops in a tumbler of water may be dermically applied over the region of the difficulty.

Friction over the region of the paralysis, by rubbing with the hand, may have a salutary effect;—but counter-irritants seldom accomplish anything favorable for the patient. The very irritation they occasion may be thrown back upon the seat of the affection so as to aggravate rather than ameliorate the difficulty.

In regard to local paralysis affecting different parts of the organs of prehension, locomotion, &c.

IN THE TREATMENT OF PARALYSIS OF THE ARMS.—*Calcarea, Calc. phos., Coccus, Nux vomica, Rhus, Sepia*, are the most prominent remedies. *China, Ferrum, Lycop., Belladonna* and *Veratrum* may be consulted for particular cases.

FOR RHEUMATIC PARALYSIS OF THE ARMS, *China* and *Coccus* *Ferrum* or *Tart. em.* have been employed.

FOR PARALYSIS OF THE ELBOW.—*Mezereum* and *Petroleum*.

FOR PARALYSIS OF THE FINGER JOINTS.—*Calcarea, Calc. phos., Magn. C. and Phos.*

FOR PARALYSIS OF THE THUMBS.—*Magn. C.*

FOR PARALYSIS OF THE LOWER EXTREMITIES.—*Belladonna, Coccus, Nux vomica* and *Rhus*, are among the most decidedly useful remedies, and also *Bryonia, Chinin., Jodatus* and *Veratrum*.

FOR PARALYSIS OF THE FEET—*Oleander* would seem to occupy the most prominent place, and *Ars.*, *China* and *Plumb.* may be consulted.

FOR PARALYSIS OF THE KNEE AND KNEE JOINTS.—*Ambr., Ars., Baryt. c.*

FOR PARALYSIS OF LEGS.—*Aconite* and *Arsenicum*.

FOR PARALYSIS OF THE TARSAL JOINTS.—*Oleander*, or perhaps *China, Arsenicum* and *Plumbum*.

FOR PARALYSIS OF THE THIGHS.—*Aconite, Aurum, Chelidonium, Majus.*

FOR PARALYSIS OF THE LUNGS.—The most prominent remedies are *Arsenicum, Carbo. veg., Ipecacuanha, Lachesis* and *Opium*.—Those holding a subordinate relation—*Baryta, Graphites, Sambucus*, or else *Aurum, Camphor, China, Pulsatilla* and *Tart. em.*

FOR PARALYSIS OF THE LUNGS FROM CONGESTION OF BLOOD.—*Aconite, Ipecac., Phosphorus* and *Sambucus*, or else *Bell., Bry.* and *China*.

FOR PARALYSIS OF THE LUNGS OF OLD PEOPLE, *Lachesis* and *Opium*, or else *Arsenicum, Aurum, Carbo veg.* and *China*.

FOR PARALYSIS OF THE LUNGS AFTER A CATARRH.—*Arsenicum*, *Tart. em.*, or else *China*, *Camphor* and *Ipecac*. For the same difficulty in children, *Aconite* and *Sumbucus*.

During treatment the utmost care should be exercised in all cases to guard against agents that may interfere with the action of remedies. The patient should have the invigorating effects of a good atmosphere in well ventilated apartments.

There are numerous difficulties that affect the whole system—that may implicate the nerves—or that the excitement of the nervous system is the chief agent in producing, among which we find,

#### PALPITATION OF THE HEART. (PALPITATIO CORDIS.)

The beating of the heart may be caused by nervous irritation alone, as may be inferred from the effect of violent emotions, as fright or anxiety, upon the organ. Great debility of the nervous system may occasion the difficulty, and also severe pain may so act upon the nerves as to cause a violent beating of the heart. It is often the case that this affection is mistaken for organic disease of the heart, when well chosen remedies for nervous irritation will cure the affection. When the whole system suffers from debility, the weakened condition of the nerves may give rise to innumerable sufferings, and none more frequently than palpitation of the heart.

When this affection arises from debilitating losses, such as hemorrhage or diarrhoea, *China* may exert a beneficial influence in promoting the recuperation of the system so as to obviate the difficulty.

When some violent emotion, as grief, produces palpitation of the heart, *Ignatia* will in all probability afford relief.

When produced from fright or fear, *Opium* may have a quieting effect, so as to overcome the affection.

When connected with the menstrual function, *Pulsatilla* will relieve, and also when the nerves have become excited from having taken into the stomach a rich quality of food, as fat meats or gravy.

For the excitement of the nervous system produced by indigestion occasioning palpitation of the heart, and especially at night, *Nux vomica* may procure relief for the patient, and also, if the nerves have been excited from intoxicating drinks, producing palpitation, *Nux vomica* may have a good effect. When connected with sick

headache in females of delicate constitution, or those suffering from prolapsus uteri, *Sepia* may produce a good effect upon the patient.

*Arsenicum* may relieve palpitation of the heart when it accompanies a paroxysm of nervous asthma. When it supervenes upon the debility produced by acute febrile difficulty, *China* will in most cases relieve.

When the action of the heart is considerable, and believed to result from nervous debility alone, *Chamomilla*, *Pulsatilla*, *Valerian*, and even *Nux vomica*, may be consulted.

In highly excitable nervous temperaments, when there are palpitation and anxiety, *Arsenicum*, *Nux vomica* and *Pulsatilla*; or, perhaps, *Calcarea* and *Ignatia* may be called into requisition.

In the treatment of all nervous affections, it is manifestly impossible to be properly guided except by the symptoms, which alone are capable of indicating the remedies to be employed.



# DISEASES OF THE SKIN.

BY C. E. TOOTHAKER.

WILLAN and BATEMAN have divided these diseases (*or rather those diseases which have usually been considered as such in medical writings*) into the following classes: 1. RASHES, 2. PIMPLES, 3. VESICLES, 4. PUSTULES, 5. SCALES, 6. TUBERCLES, 7. DISCOLORATIONS, 8. CRYPTOGAMI.

## I. RASHES.

A superficial redness, diffused, or in patches, disappearing under pressure, and commonly ending in desquamation.

RASHES have been divided into Rubeola, Scarlatina, Erysipelas, Erythema, Roseola and Urticaria. Rubeola, Scarlatina and Erysipelas are usually regarded as fevers, and as such should receive distinct consideration. Erythema, Roscola and Urticaria, will receive attention in this place.

### 1. ERYTHEMA,

Is perhaps the most simple of all eruptive diseases. It may arise only from friction, and may be perceived in its incipient state, by simply rubbing any portion of the skin rapidly with the palm of the hand, or with any rough substance.

Simple friction, if long continued, produces permanent expansion and disorganization of the surface, which is one of the forms of Erythema, called Intertrigo or chafing. It sometimes occurs in the folds of integument, as in the neck, axilla, groin, &c., of persons disposed to fat, and of delicate skin, also in young infants.

Another form appears to be created by long continued pressure, as in bed-ridden patients.

Rubefacient substances, acrid secretions or excretions, sudden changes of temperature, and various local irritations may produce a similar affection, one form of which not unfrequently results from dropsical distention of the extremities. In this latter case it usually appears in smooth, shining, uniform patches, more or less confluent, and, if considerable, may induce febrile action.

If the patient be very feeble it may assume a purple hue, and even end in Gangrene.

Erythema, depending on constitutional causes, may appear on the

face, limbs, breast, or even extend over any portion of, or over the whole body. It may appear in patches, distinct or confluent, with a sense of heat and tingling, but without severe or burning pains. This form is frequently attended with fever, depression of spirits, a sense of debility, pains in the limbs, and its sudden retrocession may give rise to various acute conditions.

Desquamation of the cuticle usually follows, and if on the scalp, the hair often falls off.

**REMEDIES.**—If Erythema arise from any mechanical cause, the first and principal remedy is *Arnica*, which may also be adapted to many of the constitutional conditions from which Erythema might be supposed to arise. It is especially indicated if the skin assume a bluish red color, as in bed-ridden patients, if it appear in spots, and if there be heat in the face, head, or upper parts, with coldness of the lower extremities. It is highly esteemed for bed-ridden patients, erosion of the nipples, and for excoriations from constant exposure to heat.

*Chamomilla*, is adapted to the excoriations of infants, especially if *Arnica* be insufficient, and if the exudation from the excoriated surfaces be acrid, and the skin exhibit a tendency to ulceration, also for adults of sour acrid secretions, and of unhealthy skin.

*Sulphur* may follow *Chamomilla*, and should be exhibited for similar conditions where *Chamomilla* has produced improvement, if the improvement has ceased. The three remedies above named will cure the majority of cases.

Of other remedies a preference may be given to *Arsenicum*, for weak, cachectic individuals, of unhealthy skin, especially if the skin be bluish, or if the excoriations have taken on ulceration, having a bluish or purple appearance. In dropsical subjects it should be exhibited after or in alternation with *Pulsatilla*, or *Bryonia*; also in the Erythema which follows intermittents, these remedies may be regarded as among the most certain to effect a cure. If Erythema end in Gangrene, *Arsenicum* of course would never be forgotten.

*Calcarea* for scrofulous children, and for Erythema dependant upon constitutional causes, where *Sulphur* and *Chamomilla* have proved insufficient, for persons disposed to fat, of unhealthy skin, easy to take on ulceration, and wherever any case obstinately resists the influence of other remedies, especially after *Nux vomica* or *Pulsatilla*.

*Causticum* for excoriation of the lips and their commissures, also of the nipples, and for children after other remedies have been tried with incomplete success.

*Carbo vegetabilis*, excoriations especially under the arm pits, and in the perineum, with oozing; and if followed by blisters, from riding on horseback, *Carbo animalis*.

Excoriations caused by the heat of summer generally require *Arnica*, *Nux vomica*, *Lycopodium* and *Sulphur*.

Of bed-ridden patients, *Arnica*, *Plumbum*.

Of the nipples, *Arnica*, *Calcarea*, *Sulphur*, *Rhus toxicodendron*, or *Chamomilla*, *Causticum*, *Graphites*, *Lycopodium*, *Nux vomica*, *Sepia*, *Sulphur*.

For children, *Chamomilla*, *Sulphur*, *Lycopodium*, *Sepia*, *Calcarea*.

## 2. SCARLET RASH, (ROSEOLA.)

Differs from Erythema in the efflorescence being of a rose color, and variously figured, but it is without pimples or any regular outlines. It sometimes appears like the exanthems, and is attended with fever, and sometimes as a mere eruption. It usually commences with specks or small patches, on the face, neck or breast. These patches may remain distinct, but usually coalesce, and at times cover large portions of the body. Febrile symptoms, gastric derangement, or other constitutional disturbance may be observed two or three days before the appearance of the eruption, and may subside along with it, or be continued after its disappearance, or there may be no constitutional symptoms whatever observable. There may be a diffused redness as in scarlet fever, or it may be distinct like measles, with irregular elevated patches, from a mere point to half an inch in diameter. It may recede and return several times within a few days before taking its final leave, or it may continue but a brief period and then disappear altogether. Its sudden disappearance may be followed by nausea, pain in the limbs, headache, giddiness, faintness, and the various symptoms of internal irritation. It is never contagious, nor does one attack afford any security against a second or a third, which may again be incited by similar causes. It is usually accompanied with sensations of itching or tingling.

It closely resembles Erythema, from which it is sometimes dis-

tinguished with difficulty. Erythema is usually followed with desquamation of the cuticle, Roseola is without desquamation, Roseola is more sudden in its appearance and more ephemeral in its character. Erythema is more lasting in its duration, and is less frequently attended with acute febrile irritation.

It is much more frequently confounded with scarlet fever, and measles, as it not unfrequently prevails at the same time; scarlet fever is usually accompanied with sore throat, measles with catarrh and cough, Roseola with neither. In Roseola the eruption is brighter, or more rose-colored, more regular than scarlatina, and without the crescent form of measles. When Roseola is attended with sore throat, it appears like Scarlatina, when with catarrh and cough, like Measles, and it can sometimes only be distinguished with certainty after the termination of the disease. It may be complicated in either of these diseases, as a precursor of the eruption in the early stages, and may not disappear until the eruption of the exanthem is fully established.

**REMEDIES.**—As this affection is often ephemeral in its character, when incited by slight causes, and independent of any deep seated constitutional disturbance, it may not always seem to require medical interference. In a majority of cases, however, it is symptomatic of febrile action, or of some constitutional dyscrasia, and should become an indication to the physician for the selection of appropriate remedies.

*Aconite* is a frequently indicated remedy, especially if there be much febrile action, heat and dryness of the skin, with tingling itching, and in all cases if the eruption be accompanied with fever as in the various exanthems.

*Belladonna*, if the eruption simulate scarlatina, if there be sore throat, flushed face, watery eyes; also if there be much redness of the skin, if the redness appear in spots, with pulse quick and small, and when from repercussion of the eruption delirium ensues, with difficulty of respiration and dilated pupils, or with twitchings and jerkings, and uneasy restlessness.

*Bryonia* may follow *Belladonna* or *Aconite* in cases where *Roseola* simulates *Morbilli*, and if there be cough, especially if there be a yellow tinge to the eruption, or to the skin, and if there be tingling itching.

*Chamomilla*, if there be gastric disturbance, restlessness, bitter-

ness of the mouth, and especially for children during dentition, in which case it may often be followed advantageously with *Calcarea carbonica*, or *Sulphur*.

*Nux vomica*, also, if there be gastric disturbance, uneasy restlessness, and irritability, costiveness, or sluggish inactivity of the stomach and bowels, colic, or diarrhoea with gripings; and also if it be attended with nausea, sour, acrid and burning eructations, tingling burning, itching of the skin, with a sense of torpidity when touched.

*Pulsatilla*, also, if there be gastric disturbance with diarrhoea, or with suppression of accustomed secretions, the eruption generally resembling measles, with tingling, itching or pricking, as if from the stings of ants.

*Rhus toxicodendron*, if it occur from sudden changes of weather, and especially from cold damp weather, if the tingling, itching and burning be attended with a sensation of crawling, as of a worm, and especially if it be worse at night and in bed.

*Sulphur* always after other remedies; and in a few chronic cases where there is a predisposition to such eruptions, *Calcarea*, *Arsenicum*, *Graphites*, and perhaps *Sepia*, will be found to be necessary and useful remedies.

### 3. NETTLE RASH, (URTICARIA.)

This affection is characterized by elevations of the cuticle of a somewhat circular form, whence it has received the appellation of wheels, usually surrounded by a diffused redness, and always attended by itching, tingling, stinging, or burning. These elevations are of various sizes, generally roundish in shape, or may be oblong, slightly hard, and whitish, but sometimes redder than the healthy skin. They never contain any liquid, and have no tendency to suppurate. The disease is never contagious.

The acute form of the disease may commence with fever, or the fever may precede the eruption; attended with gastric and nervous affections, nausea, headache, faintness, languor, chilliness, &c. On the occurrence of the rash these symptoms usually disappear, the skin rising up in patches, surrounded by a vivid redness; the elevations themselves most frequently assuming a white appearance. Rubbing or scratching greatly increases the eruption, often causing it to appear upon apparently healthy portions of the surface. It is generally most abundant on the inside of the arms, and about the

shoulders, loins, and thighs, though it may appear on any portion of the surface, or perhaps even on the inner surface of the mouth and throat. It comes and goes irregularly, often disappears in the day and returns in the evening, or appears on undressing and on retiring to bed. The eruption at times disappears in a few minutes, at other times not for hours, and an attack may last with frequent changes for a week or ten days. At the close there is usually some desquamation of the skin. A complete retrocession of the rash during the progress of the complaint frequently gives rise to alarming symptoms, which subside at its reappearance.

If the attack be occasioned by improper or unwholesome food or drinks there is usually pain at the epigastrium, nausea, vertigo, and uneasiness, and on the appearance of the eruption the face, neck and even the whole body may appear much swollen, red and flushed, interspersed here and there with wheel-like elevations, single, or in clusters, with intolerable heat, tingling and itching. The patient may also suffer from oppressed breathing, almost threatening suffocation; or the pain, nausea, vertigo, and oppression at the stomach may become alarmingly severe; this violence, however, is not likely under proper treatment, to continue many hours, and the patient generally recovers in a few days.

NETTLE RASH has been known to assume an intermittent character, either as an attendant on intermittent fever or otherwise, occurring in paroxysms, either daily or every two or four days, or even at longer intervals.

In chronic cases, the eruption after disappearing for a considerable period, may often be renewed again from slight causes, the wheels being generally whiter, and with less redness of the surrounding surface. There is the characteristic tingling, itching or stinging, and the complaint is constantly recurring for months or years. At times the wheels attain to a considerable size, and appear as small tumors, in the loins, or on the limbs. These tumors may extend over a surface of several inches, may interfere with motion, and become hot and painful, or tender to the touch. They usually subside in a few hours, and leave a sensation as if bruised. This is called urticaria tuberosa.

The wheels may continue for days or even weeks, although the redness has entirely disappeared. This form is called urticaria persistens.

If as in a few cases the eruption does not appear, or only a very few wheals which shortly disappear, whilst the stinging and itching continue, and as if needles were being run into the skin, it is termed urticaria subcutanea.

Urticaria is somewhat difficult to distinguish from one of the forms of Lichen, but Lichen is always papulous, Urticaria never.

TREATMENT.—For acute Urticaria the principal remedies are *Aconite*, *Bryonia*, *Dulcamara*, *Nux vomica*, *Phosphorus*, *Rhus toxicodendron*, *Urtica urens*.

*Aconite* may be given in all eruptive diseases, when the eruption is preceded by fever, with hot dry skin, quick pulse, restlessness, and anxiety.

*Bryonia*, if the sudden disappearance of the eruption is followed by difficulty of breathing, pain in the breast, and pluritic or pneumonic conditions with cough; or pain in the head with soreness, aggravated by movement.

*Dulcamara*, if an attack follow exposure to cold and damp weather, and if there be diarrhoea with violent itching and burning.

*Nux vomica*, if from a disordered stomach, with nausea, vomiting, &c., constipation, or in persons subject to affections of the liver and stomach, discontented restlessness, cramps, convulsions, and other alarming symptoms, in which case also *Belladonna* will be found useful; also for drunkards, coffee-drinkers, wine-bibbers, &c.

*Pulsatilla*, when the gastric symptoms are predominant, with diarrhoea, chilliness, disposition to weep and lament, headache and shuddering, especially if there be considerable swelling and hardness, the itching and stinging being aggravated at night and by the heat of the bed.

*Phosphorus*, for symptoms similar to *Bryonia*, and especially after *Rhus*, if there be paleness, torpidity, and tension of the skin, cloudiness, dizziness, and vertigo, with constrictive, stinging and burning pains, and crawlings in the skin.

*Rhus toxicodendron* after *Bryonia*, if that remedy is insufficient, and especially if the patient is worse at night and in bed, also if it arise from change of weather, from cold damp weather, and if its disappearance is followed by constrictive stinging pains, with crawlings, shiverings as if from cold water, and itchings.

*Urtica urens*, when the eruption is distinct, when there is burning

stinging and itching, and when there is little constitutional disturbance.

Among other remedies may be mentioned *Arsenicum*, when the blotches are large and white, appear in clusters, and are attended with intolerable burning, itching, and stinging; *Ipecacuanha* when there are pricking pains as of needles, with nausea or vomiting, and especially if the patient scratch till vomiting ensue; *Hepar sulphuris* has been recommended where there are catarrhal symptoms affecting the head, especially if worse on one side; *Calcarea* to reproduce the eruption, when other remedies fail; *Sulphur* also for symptoms similar to *Rhus toxicodendron*, and after other remedies, to reproduce the eruption, will often be found a necessary and invaluable remedy.

#### *Recapitulation.*

For the itching, burning, stinging, &c., attendant on the eruption, all the remedies are adopted.

For the fever *Aconite* especially, and afterwards all the remedies.

For disappearance of the eruption *Bryonia*, *Rhus*, *Phosphorus*, *Calcarea* and *Sulphur*.

For gastric affections, *Nux vomica*, *Pulsatilla*, *Ipecacuanha*.

For chest affections, difficulty of breathing, cough, &c., *Bryonia*, *Phosphorus*, *Rhus*.

If the eruption be of an intermittent character, *Nux vomica*, *Ipecacuanha*, *Arsenicum*, *Calcarea carbonica* and *Lycopodium*.

If there be spasms, convulsions, &c., *Nux vomica*, *Belladonna*, *Calcarea*.

If there be much swelling, large tumor-like wheels, hard and white, *Pulsatilla*, *Arsenicum*, *Calcarea carbonica*.

#### CHRONIC URTICARIA.

For chronic urticaria the most approved remedies are *Lycopodium* and *Calcarea carbonica*, *Arsenicum*, *Petroleum*, also *Nux vomica*, *Ranunculus bulbosus*, *Rhus toxicodendron*, *Sulphur* and *Nitric acid*.

*Lycopodium*, if chronic urticaria be attended also with a long continued constipated condition of the bowels, if there be much borborismus and great tendency to suffer from cold, or from fresh air.

If the gnawing and itching are aggravated by the open air, or by a change of air, and if the eruptions are large and painful with redness, also if it return periodically.

*Calcarea carbonica*, when there is quivering of the skin, giddiness, burning, biting, and itching, and if the eruption have a tendency to disappear in the fresh air; if there be excessive sensibility to cold, dampness, &c. More especially adapted to scrofulous persons of leuco-phlegmatic constitutions, and of loose and delicate muscular fibre.

*Arsenicum* has cured chronic cases with the following symptoms: round elevated wheels, surrounded by a faint blush, appear in succession in various parts of the body, and again disappear several times in a day, disease less troublesome in winter, but especially annoying in the heat of summer, depriving the patient of rest, and impairing her health, which had been good in winter.

During the autumn of 1851, I was called to treat a case of an infant child which I found when I arrived, to be affected with chronic spasms. It lay apparently senseless, there was great heat in the head, constant muscular or nervous twitchings, jerkings, and quivering, left side much more effected than the right side. *Belladonna*, *Hyoscyamus*, *Stramonium*, &c., afforded but slight relief.—*Nux vomica* promptly relieved the spasms; after the spasms a full crop of wheels appeared on the surface, large, elevated, and covering considerable portions of the body. These attacks were renewed every few months. *Calcarea carbonica* cured.

The following indications also may be consulted. For nettle rash excited or aggravated in the fresh air *Nitric Acid*; worse after violent exercise, *Conium*; chronic nettle rash with miliary eruption, *Petroleum*; also, *Causticum* and *Carbo vegetabilis*.

## CLASS 2.

### PAPULOUS DISEASES, (PIMPLES.)

“ Slight elevations of the skin, the blood vessels being engorged with red corpuscles, and the tissue infiltrated with a colorless fluid, more consistent than serum.”—*Simon*. According to Willan there are three varieties of Papulous diseases: Strophulus, Lichen and Prurigo. Papulous diseases are not contagious.

#### 1. STROPHULUS; OR GUM,

Is divided into two varieties, the red and the white gum, which

appear to differ but little except in color. The eruption generally appears on those parts of the body which are most exposed to the atmosphere, as the face, arms, &c.; but may extend over the whole body. It is generally confined to infancy, and is seldom or never seen after the first dentition.

Strophulus in its most simple form consists of minute florid pimples, interspersed with occasional patches of redness and perhaps a few vesicles, which dry up without breaking. Occasionally, there are intermingled with these a few white or light-colored vesicles, and sometimes all the pimples have this appearance. The severer forms of this complaint are attended with pain and itching, and at times with excoriations resembling intertrigo. It generally runs its course as an acute disease in from two weeks to a month, and often occurs with but little fever or other disturbance of health. If the pimples are numerous they may create distress by their heat and itching, which would be greatly increased by keeping the child too warm. It is not usually dangerous, but its retrocession may be followed by severe internal sufferings.

TREATMENT.—If the disease be caused by dentition, give *Chamomilla* and *Sulphur*; *Chamomilla* at night, *Sulphur* in the morning, for a few days, and the eruption will probably entirely disappear; should this prove insufficient, give *Calcarea carbonica*. For children of delicate skin and of manifest scrofulous tendencies, if the above remedies prove insufficient, *Mercurius* will often be found useful after *Chamomilla*.

If the disease be the result of uncleanness, of badly ventilated rooms, and bad air, or of keeping the child too warm, *Rhus toxicodendron* is the best remedy, afterwards *Sulphur* or *Causticum*.

If there be fever, *Aconite* should be given, and for retrocession of the eruption, give *Rhus*, and afterwards *Sulphur*; if not relieved give *Calcarea*, or *Bryonia*, or *Phosphorus*, or if there be spasms and convulsions with gastric sufferings give *Nux vomica*.

Strophulus is but a mild form of Lichen, under which head it has been properly included.

## 2. LICHIEN.

There are three varieties of Lichen; Simplex, Agrius, and Urticatus.

## LICHEN SIMPLEX.

Lichen Simplex consists of small red pimples about the size of a pin's head, appearing like strophulus on the more exposed surfaces of the body, and sometimes also extending itself over the other parts. They may have more or less heat, tingling and itching, are usually larger on the face, and often slightly vesicular on the extremities; they begin to decline in a few days, and terminate in a slight scurf in one or two weeks. Sometimes successive crops of the eruption appear, and the complaint is prolonged even for months. After scratching, small bloody scabs are frequently seen on the surface of the papulae, which in some chronic cases scarcely differ from the skin in color, and can perhaps only be discovered by passing the hand along the surface; or there may be desquamation and thickening of the skin until the disease resembles Psoriasis.

The prickly heat of summer is one of the simplest forms of Lichen, which is often very severe in tropical countries, the tingling, stinging and itching being almost insupportable.

The Lichen pilares of Willan occurs only at the roots of the hair.

Lichen lividus has a purplish hue resulting from the scorbutic or hæmorrhagic constitution of the patient.

One form of ringworm is the Lichen circumscriptus of Willan, the eruption appearing in a circular form. In this form, as new pimples form on the circumference, those in the centre fade and exfoliate.

Lichen Gyratus appears in the form of a band, and seems to travel over some portion of the skin.

Lichen Simplex is often unattended with any observable functional disturbance whatever, though its retrocession may be attended with morbid sensations.

TREATMENT.—If there be fever *Aconite* should be given, which is also indicated by the pricking and stinging eruption like flea bites, or by the broad red blotches, sore and sensitive to the touch.

*Bryonia* after *Aconite*, especially during the heat of summer, and in tropical climates where it is caused by the intense heat. If these remedies are followed by *Sulphur* they will cure a large proportion of cases. *Carbo animalis* or *Vegetabilis* should be given if the roots of the hair are affected, and if the itching be aggravated on retiring to bed at night.

*Rhus toxicodendron* may be given after *Aconite* or *Bryonia*, when they prove insufficient, also in alternation with *Carbo*, when the roots of the hair are affected, and if followed by *Sulphur* will generally complete the cure.

For all the varieties of *Lichen*, Hunt, (allopathic,) recommends *Arsenicum*, Fowler's Solution, and records a number of cures, and Devergie, (also allopathic) strongly recommends *Cantharides*.

#### LICHEN AGRIUS.

This variety commences with fever, nausea, pain in the stomach, headache and chilliness, which subsides on the appearance of the eruption, or if the fever continue it is in a milder form. The pimples are very small and numerous, red and inflamed, and appear in patches, and being attended with itching, burning and a painful tingling; it has sometimes been mistaken for erysipelas. The continuous redness between the pimples, and the tendency to become pustular, distinguish this from the *Lichen Simplex*: also, in general, the severity of the symptoms, the itching and tingling being combined with a smarting and burning pain, which is greatly aggravated by the heat of the bed, and by everything which tends to irritate the surface. It is generally alleviated in the morning and worse towards evening. After a few days the pimples partially ulcerate, discharging a sero purulent fluid, which concretes into small scabs. In about two weeks the complaint usually terminates in minute furfuraceous scales. It usually occupies the outer surface of the limbs, but may occur on the cheek.

Sometimes the surface remains moist, or the disease vanishes to return again, and thus successive crops of the eruption appear for several weeks. In this form it resembles Eczema. The skin may become so thickened and impaired as to be very painful on being rubbed or otherwise disturbed.

TREATMENT.—In the early stages *Aconite* and *Ipecacuanha* are adapted, and afterwards *Bryonia*. If the disease be not arrested after the fever subsides under the proper administration of these remedies for about four or five days, give *Rhus toxicodendron* and afterwards give *Sulphur*.—*Belladonna* may be indicated if there be great uneasiness, restlessness and impatience, with redness and swelling and burning pain when touched.

*Cantharis* is called for in obstinate cases and when the disease resembles Eczema or Impetigo, itching, burning, gnawing pains, worse on being touched.

*Phosphorus* when the skin becomes impaired, thickened, cracked and painful on being disturbed, as by every motion, and when the disease after abating is constantly being renewed.—Also *Calcarea carbonica*, and in the most obstinate cases.

#### LICHEN URTICATUS.

This variety appears at first in inflamed tumefactions or wheels, resembling the sting of a nettle, which subside in a day or two, and are succeeded by pimples, and other wheels appear in their turn to be succeeded by pimples. The whole surface may at length be covered with the eruption, and the pimples may become confluent after the wheels have disappeared. The itching is extreme and the affection obstinate; it sometimes affects young children and continues many months, occasionally follows vaccination, and is by the ignorant unjustly ascribed to its effect, or to unhealthy matter used by the physician. Like the other forms of Lichen it may frequently disappear and afterwards return. It always terminates in desquamation.

**TREATMENT.**—For this form of Lichen the remedies mentioned in Lichen Agrius are generally adapted. See also Nettle Rash.—*Urtica Urens*, *Apis melifica*, *Dulcamara* and *Petroleum* may also be found adapted, also *Coccus indicus*, *Rhus*, *Arsenicum* and *Lachesis*, or *Hydrocyanic acid*.

In all the forms of Lichen the local treatment is important; external applications may produce retrocession and alarming symptoms of internal disorder, as fever, headache, pains in the stomach or bowels, with colic, cramps, convulsions, and delirium. Imprudent exposures to cold, and damp feet, and food which disagrees with the stomach are also dangerous and may increase the sufferings.

The food should not be of an irritating character, and in very severe cases the patient should remain at rest. In old school practice an emulsion of bitter almonds has been recommended: also much diluted *Hydrocyanic acid*, lotions of diluted vinegar occasionally give relief. Homœopaths who use external applications, ought first to

give the same remedy internally for at least twenty-four hours previous to the external application, and probably in low dilutions, or if simple remedies as vinegar in small massive doses.

The following reflections arising from the approved allopathic treatment of this disease, are made as suggestions to be adopted or rejected at pleasure.

1st. Wood and Bache recommend lotions of lime water, also of a solution of *Acetate of Ammonia*—also oils—rose water, ointment, oleaginous substances.—*Glycerine* is also said to be a good external application, also powdered starch. Wilson recommends *Collodion*, also a solution of *Gutta Percha* or *Caoutchouc* in chloroform.—Erasmus Wilson has found great benefit from a solution of the seeds of the *Croton tiglium* in alcohol. Now it so happens that nearly all the external applications recommended by allopathy for this disease have also been recommended for burns by distinguished allopathic physicians, each of whom claims to have had signal success in the treatment of burns in the application of his favorite remedy. It may be thought too bold a suggestion to enquire how far Lichen in its various forms may be considered analogous to burns and scalds, and how far this suggestion might be allowed to modify the homœopathic treatment. The efflorescence certainly bears some analogy, the vesicles of both are at first filled with serum, which at length becomes slightly opaque, and forms a crust on the surface. In both, the first sensations are burning, tingling, scalding, &c., followed by intolerable itchings and soreness. In both, the surface beneath appears red and inflamed, and lichen is also liable to a degree of suppuration like a burn, which may also heal without suppuration: and second, how far an external treatment, such in principle as is considered homœopathic to burns, might be allowed in connection with the administration of homœopathic remedies.

#### PRURIGO,

Is distinguished from Lichen by the color of the eruption, which is nearly the same as the healthy skin, the pimples being generally larger and less pointed and the itching being more intense. Lichen is a more acute disease, being often attended with fever; Prurigo is chronic and without fever; the favorite resorts of Prurigo are the neck, back, shoulders, and the outer surface of the limbs. It may

affect almost any portion of the skin. From their want of color the pimples are often not observed except by passing the fingers gently over the surface, but there are generally observable here, and there, a few small black scabs, the result of abrasions from the rubbings to which the intense itchings have impelled the patient. There may also be intermingled with the pimples occasionally a few wheels, or a few inflamed pustules, these last being probably produced by friction. With the itching there is frequently a sense of formication and pricking, as if ants were crawling over the surface, or as if the skin were being pierced with hot needles. These sensations are often aggravated by heat, or by exposure to cold, as in undressing, and may be so distressing as to prevent sleep for several hours. Under old school treatment the disease is often persistent for months and sometimes for years. In chronic cases of years' duration the pimples may become much enlarged, perhaps confluent, the skin thickened, and indurated or inflamed, the pimples mingled with vesicles, pustules, or even with boils, febrile symptoms and internal disorders may arise until the patient is reduced to a condition of indescribable wretchedness, which, say Wood and Bache, is "beyond the reach of remedies."

In Prurigo Seniles which is peculiar to old men, the eruption is generally flatter and less abundant than in the ordinary variety, the itching very severe and permanent, and the complaint obstinately persistent, distinguished also by a tendency to generate pediculi, which may become numerous and troublesome.

**TREATMENT.**—This disease, which has proved so formidable under allopathic treatment, and has so often baffled the wisdom of the sages of the dominant school of medicine, will often yield to the alternate administration of *Rhus toxicodendron* and *Sulphur*, for a few weeks. If this should not prove sufficient, Homœopathy has abundant resources in her *Materia Medica*, and no case should be despaired of until a thorough and well directed effort has been made to cure. The disease may recur several times after it appears to have been overcome by the use of remedies, but this should be no ground of discouragement, as, in the meantime, it has been prevented from establishing itself in its more obstinate forms, or from assuming its more formidable aspects, and by a continuance of the treatment, it will ultimately yield altogether.

The following remedies may be indicated, *Agnus castus*, *Ambra grisea*, *Antimonium crudum*, *Arsenicum album*, *Baryta carbonica*, *Bovista*, *Bryonia alba*, *Calcarea carbonica*, *Carbo animalis* or *vegetabilis*, *Causticum*, *China*, *Coccus*, *Colocynth*, *Conium maculatum*, *Digitalis*, *Dulcamara*, *Euphorbium*, *Graphites*, *Ipcacuanha*, *Kreosotum*, *Ledum palustre*, *Lycopodium*, *Magnesia*, *Mercurius*, *Mezereum*, *Muriatic acid*, *Nitric acid*, *Nux vomica*, *Oleander*, *Oleum animale*, *Opium*, *Petroleum*, *Platina*, *Pulsatilla*, *Ranunculus bulbosus*, *Rhus toxicodendron* or *radicans*, *Rhus vernix*, *Ruta*, *Sabina*, *Sarsaparilla*, *Sepia*, *Silicea*, *Spongia*, *Staphysagria*, *Sulphur*, *Sulphuric acid*, *Tartarus emeticus*, *Thuya*, *Veratrum*, *Viola tricolor*, *Zincum*.

Of the above remedies, *Aconitum*, *Calcarea*, *Mercurius*, *Nitric acid*, and *Sepia*; or *Bryonia*, *Causticum*, *Carbo veg.*, *Conium*, *Graphites*, *Opium*, *Pulsatilla*, *Rhus tox.*, *Sulphur*, *Staphysagria*, *Spongia*, are usually considered most important for this disease.

If pricking predominate with the itching, *Baryta carb.*, *Bryonia*, *Graphites*, *Platina*, and *Rhus*.

If there be biting stinging itchings, *Anacardium*, *Euphorbium*, *Mezereum*, *Pulsatilla*, *Silicea*.

If there be numbness of the skin, &c., *Ambra*, *Anacardium*, *Lycopodium*, *Oleander*, *Secale*, *Platina*.

In general, *Aconite* is indicated or a crawling itching, if the skin be dry, and with burning sensations, in persons subject to acute inflammations and rheumatic affections, of a sanguine temperament, especially if they lead a sedentary life.

*Calcarea carbonica* for symptoms similar to *Aconite*, more especially in chronic cases, and for persons of weak, cachectic habits, where there is no discoloration of the skin, or where there are small white pimples, or a dry, rough skin, or a miliary eruption. The sensations are burning, biting, itching, quivering in the skin, easily excoriated; useful when all other remedies fail, and especially for haemorrhagic patients, and where there is a scrofulous tendency in the system, after *Aconite*, *Pulsatilla*, or *Sepia*.

*Mercurius* would often be found a most useful remedy for persons who have taken little or none of the different mercurial preparations, and where there is a tendency to scrofulous glandular enlargements, and suppurations, unhealthy skin, and if the itching be violent all over the body, aggravated in the evening and in bed, especially if the skin have a yellowish hue, as in chronic hepatitis.

*Nitric acid* is most decidedly adapted, when the patient is syphilitic, or has been affected with diseases of that character, or has taken any of the mercurial preparations in large doses, if the itching be aggravated in the open air, from cold, or in a draught of fresh, cold air, and the skin crack easily in cold weather.

*Sepia* is useful for females, when there are menstrual irregularities, and after *Pulsatilla*; also, at times, after *Mercurius*, or where the improper use of mercurials have been productive of the disease. It is given in a great variety of eruptive diseases, attended with itching, especially if it changes to burning, if it appear most about the joints, dry or like scabies, or intermingled with liver spots, for chlorotic persons, also for those affected with syphilis, blenorhoeas, and other affections in which the mucous surfaces are also involved.

*Rhus toxicodendron*, if there is torpidity, with crawlings, or with stingings and burning itching, aggravated in bad weather, by changes, especially to damp cold weather, and by the heat of the bed; the open air, whether hot or cold, is unpleasant; for persons subject to rheumatism, erysipelas, and also to the prurigo of old people of unhealthy skin, it is especially adapted.

*Sulphur*, if too much sulphur has not already been given, is adapted to almost all affections attended with itchings, or with itching burnings: and in those cases which have been aggravated by crude doses of sulphur, it is worthy of observation how far the thirtieth and higher dilutions of sulphur will, notwithstanding, exert a curative effect. In almost all cases of prurigo, *Rhus* and *Sulphur* may be administered with advantage in the earlier stages of the treatment.

Itching is sometimes symptomatic. Thus itching of the nose is regarded as symptomatic of irritation of the stomach, or intestinal canal, which may arise from worms, or from various other causes; itching of the anus may depend upon ascarides; itching at the end of the urethra upon irritation of the bladder, or its neck; itching of the labia pudendi upon irritation of the uterus or vagina; itching of the prepuce may depend upon derangement of the sebaceous secretions around the glands; and itchings at any of the orifices of the body may be caused by the condition of the secretions from that orifice, inciting irritation and inflammation of that part.

There may be also a general pruritus of the whole surface, or one affecting different portions of the surface, at different times,

without any visible eruption, or any discoverable morbid secretion. Such cases are always to be considered symptomatic of some constitutional derangement, or of some morbid state of some important internal organ, the results of which are manifested upon the skin, thus directing our attention to the nature of the disease, and to the application of the appropriate remedy; and in no case, it is to be hoped, will the intelligent Homœopathic physician, fall into the error of old school Therapeutists, who regard the external as of more importance than the internal remedies, and who, in their external applications, appear to have no principle to guide them, unless it be some accidental cures, in regard to which they appear to have little true knowledge, either of the diseases they have cured, or of the nature or influence of the agents employed for their removal.

In direct antagonism then to old school teachings, the Homœopathist should adopt the following motto. Internal remedies are alone to be relied on in the treatment of prurigo, and external remedies, if used at all, should only be used for purposes of alleviation, whilst the internal remedy is acting upon the internal dyscrasia, by which alone the disease is supported and sustained.

## VESICULAR DISEASES.

These diseases are characterised by small collections of transparent fluid effused beneath the skin. This fluid may or may not afterwards become turbid, or purulent; but in the process of recovery, if the fluid is absorbed, the epidermis desquamates in the form of scurf, whilst, if it becomes sero-purulent, it forms a laminated scab. Some of the vesicular diseases are attended with fever, and general severe disturbance; in others the health is scarcely at all affected.

They may be divided into Herpes, Eczema, and Impetigo; Miliaria, Chicken-pox, &c., being generally classed under Eruptive Fevers.

### 1. HERPES.

Herpes consists of clusters of vesicles, on an inflamed base, each cluster being distinct, and having skin of the natural hue between them. They usually terminate in crusts in from one to two weeks, the lymph, which is at first clear, becoming gradually milky and opaque. There may be heat, tingling or pain, and considerable constitutional disturbance.

It occurs most frequently in persons of delicate skin; and where there is a constitutional predisposition, it may be incited by various causes.

It has been divided into HERPES ZOSTER, or Shingles; HERPES PHLYCTÆNODES; HERPES CIRCINATUS, (*Ring-worm*); HERPES LABIALIS; and HERPES PRÆPUTIALIS.

1. HERPES ZOSTER, (*Shingles*), (*Zona*), distinguished by the clusters being so arranged, on one side the trunk, as to form a belt, of which one extremity is directed towards the spine, and the other towards the sternum, or linea alba. This band may extend half way round the body, either direct or oblique, or it may commence on the trunk, and end on one of the extremities. The clusters may commence in the middle, and extend either way, or, commencing at each extremity, approach each other till they meet. It is more common on the right side, and seldom passes the median line of the body. It may appear on the neck or side of the head. In Zona, the

vesicles are generally roundish, and at first very minute, but, when mature, may attain the size of half a pea. They have a narrow red margin, and may become confluent. These vesicles, or clusters of vesicles, succeed each other, one sometimes beginning to fade before another is formed. In three or four days the vesicles begin to decline, and the scabs usually fall off the twelfth or fourteenth day; but as each cluster of vesicles runs its own course, the disease may be prolonged for months. Sometimes patches ulcerate and tedious sores result. Febrile symptoms, lassitude, &c., often precede the eruption, and may be relieved when the vesicles appear, or may continue afterwards. There may be burning and smarting pain in the eruption, and severe shooting pains deep in the body.

TREATMENT.—The principal remedies in this disease are *Rhus*, *Graphites*, and *Mercurius*. In obstinate cases, *Arsenicum*, *Causticum*, and *Silicea*, may be adapted. Other remedies are *Bryonia*, *Chamomilla*, *Euphorbium*, *Natrum*, *Nitric acid*, *Pulsatilla*, *Silicea*, *Sulphur*, and *Tartar emetic*. For indications consult the pathogenesis of the remedies.

HERPES PHLYCTENODES is distinguished by the irregularity of the appearance of the clusters, which have no fixed position, occurring most frequently on the cheek, arms, neck, or breast, and at times spreading over the whole trunk. The more extensive the eruption, in general the smaller the size of the vesicles, and the contrary. Its course is often shorter than Herpes zoster, though it may assume a chronic character, and continue for months.

REMEDIES.—Consult Herpes zoster, &c.

HERPES LABIALIS occurs about the lips and angles of the mouth. A burning sensation and redness is soon followed by vesicles, at times extending from one angle to the other, along either lip, or around the entire mouth. The part becomes hard, swollen, and often very painful. The inner mouth and fauces may exhibit vesicles similar to those upon the lips. It occurs in different forms of fever and is said to mark the commencement of convalescence.

REMEDIES.—*Arsenicum*, *Kreosotum*, *Natrum muriaticum*, *Rhus*, *Sepia*, *Staphysagria*; or *Belladonna*, *Bovista*, *Bryonia*, *Ignatia*, *Nux vomica*, *Silicea*, *Sulphur*.

HERPES PRÆPUTIALIS is distinguished only by its location upon the inner or outer surface of the prepuce. The clusters are usually very small, and, if left undisturbed, often run their course to recovery in ten or twelve days; but on the inner surface, they may become irritated from the motion of the part, from its secretions, or from other causes, and end in obstinate sores. It has been mistaken for syphilis; from which it is easily distinguished, since syphilis is not preceded by or does not commence with vesicles, nor in clusters, and Herpes has not the hard, abrupt edges, nor those adhesive white exudations, peculiar to syphilitic or chancereous ulcers.

REMEDIES.—*Rhus, Causticum, Hepar, Nitri acidum, and Sepia, or Aurum, Dulcamara, Mercurius, Phosphoricum acidum, Sarsaparilla, Silicea, Sulphur,* will be found adapted.

HERPES CIRCINATUS, or *Ring-worm*, is distinguished by the vesicles occurring in circular patches. Other eruptive diseases, called ring-worm, are not vesicular. In the herpetic variety, the vesicles usually appear in the circumference of the ring, leaving a portion of healthy skin in the centre. The vesicles are frequently so small as to be seen with difficulty. As these vesicles dry up, and form scabs, new vesicles appear, till the disease runs its course. It usually terminates without treatment in two or three weeks.

Occasionally it is of a much more aggravated character, and spreads itself over a large extent of surface; or the skin beneath the vesicles ulcerates to a considerable depth, forming a succession of belts, the outer one being in the forming, or vesicular stage, the second in the ulcerative, the centre in the process of recovery, &c. Herpes at times exhibits circular patches of concentric rings, of different shades of color, which has hence been denominated Herpes iris. There is first a red spot, which soon becomes vesicular, the central vesicle being yellowish white, the ring around it brownish red, the second ring again yellowish white, the third narrow and dark red, the fourth a lighter red, &c., till it gradually fades into the natural color of the skin. This affection is very rare, and will usually disappear without treatment in two or three weeks.

REMEDIES.—*Calcarea, Causticum, Clematis, Manganum, Nitrum, Rhus, Sepia, Sulphur.*

If Herpes assume an ulcerative character, and show a disposition

to advance, and to produce constant destruction of the integument, and of the subjacent tissues, it is called *Herpes excedens*.

REMEDIES.—*Calcarea, Clematis, Conium, Dulcamara, Graphites, Hepar, Petroleum, Rhus, Sepia, Silicea, Staphysagria*; and perhaps, also, *Arsenicum, Cantharis, Cicuta, Lycopodium, Mercurius, Phosphorus, Sulphur*. This last variety is not easily distinguished from *Lupus vorax*.

In the treatment of the different varieties of the herpetic eruptions, proper attention should be given to the condition of the various secretions and functions of the body, as well as to the constitutional and other dyscrasias, upon which the proper selection of the remedy is always more or less dependant. Thus persons of hæmorrhagic tendencies might be benefited by such remedies as *Calcarea, Cantharis, Arsenicum, Rhus, &c.*, whilst persons of opposite tendencies might receive more benefit from *Conium, Graphites, Pulsatilla, Sulphur, &c.* If the urinary organs were affected, *Aconitum, Cantharis, Causticum, Mercurius*, and *Rhus*. If the liver, *Bryonia, Mercurius, Nux vomica, Pulsatilla, Sulphur*, or *Arsenicum, China, Conium, Lycopodium, Silicea*, will probably be the appropriate remedies.

If burning sensations predominate, *Arsenicum, Carbo vegetabilis, Causticum, Mercurius*, and *Sulphur*, or *Calcarea, Fluoricum acid., Hepar, Lycopodium, Staphysagria, Rhus*.

If itching predominate, give *Clematis, Sepia, Rhus, Sulphur*, or *Arsenicum, Causticum, Mercurius*.

If there be pricking, *Arsenicum, Clematis, Mercurius, Rhus, Sepia*, or *Nitri acidum, Silicea, Sulphur*.

FOR DRY HERPES, give *Arsenicum, Calcarea, Sepia, Silicea, or Dulcamara, Ledum, Mercurius, Rhus, Sulphur, Veratrum*.

FOR FURFURACEOUS, (bran-like).—*Arsenicum, Calcarea, Silicea, Lycopodium*.

FOR SCABBY.—*Calcarea, Clematis, Dulcamara, Mercurius, Mercurius aceticus, Sepia, Sulphur*.

FOR SCALY.—*Clematis, Lycopodium, Mercurius, Phosphorus, Sepia*.

FOR SCURFY.—*Calcarea, Graphites, Lycopodium, Sulphur*.

FOR HUMID.—*Graphites, Rhus*, or *Arsenicum, Clematis, Hepar, Lycopodium, Sepia, Staphysagria*.

FOR SUPPURATING.—*Arsenicum, Mercurius, Sepia, Rhus, or Dulcamara, Silicea, Staphysagria.*

FOR YELLOWISH.—*Arsenicum, Cicuta, Cuprum, Mercurius, Sepia.*

FOR WHITISH.—*Arsenicum, Bryonia, Phosphorus, Valeriana.*

ECZEMA, (*Humid Tetter, Running Scall,*)

Is a non-contagious eruption of minute vesicles, in irregular patches, with or without surrounding redness. It is divided into Eczema simplex, rubrum, and impetiginoides. It may be acute or chronic. It consists of patches of closely crowded vesicles, transparent, with little or no intervening redness, without fever, and with no other local sensations than a disagreeable itching and tingling. In a short time the serum in the vesicles is either absorbed, or exudes, and forms a minute scale, which leaves the skin perfectly sound. Its whole course usually occupies from one to three weeks.

In Eczema rubrum, the eruption is preceded and accompanied by inflammation and redness of the skin ; the vesicles first appear like glistening points, which enlarge to the size of a pin's head. These may dry up in about a week, and be succeeded by desquamation ; after which the surface remains of a reddish color for a few days.

The severer cases are attended with much heat, swelling, and redness ; the vesicles break and exude a serous fluid, which excoriates the skin, thus increasing the suffering. This secretion at length diminishes, and concretes into scales, which separate and are followed by others several times successively. It is a favorable indication when the scales become more adherent, and upon separating, leave the skin less inflamed. If, after two or three months, the eruption continues to appear, it may be considered as having assumed the chronic form.

Eczema impetiginoides, when the vesicles become pustular similar to impetigo. The liquid becomes opaque, and concretes into soft yellow scales, which soon separate, leaving the surface inflamed ; a reddish liquid is exuded, which again concretes into scales as before. These scales grow thinner and drier, until they disappear in a few weeks, unless the disease degenerates into the chronic form.

Eczema may be confined to a single surface of variable extent, or appear in patches over the whole body. If the disease is extensive,

it is apt to give rise to fever. In all its forms, it is attended with itching, tingling, burning, etc., in severe cases almost intolerable. In young, healthy persons, with fair skin, the eruption may rise more quickly to its height, and decline more rapidly, leaving no observable traces behind it; but in those of dark, dry, harsh skins, and in old age, the inflammation is apt to extend to the subcutaneous tissue; the surface becomes fissured, the healing slow and interrupted, and when the disease has disappeared, it leaves a brownish colored surface.

#### CHRONIC ECZEMA.

This results from successive crops of vesicles, which break, and the serous exudation keeps up a constant inflammation. The skin becomes excoriated, and covered with scales, which fall, and are replaced by others; and when the disease is extensive, presents a diversity of appearances, such as the forming vesicles, the excoriated or bleeding surface, scabs or scales, in various stages, with more or less inflammation, redness, or swelling. The quantity of liquid exuding from these surfaces is sometimes very great, and when dry, very adhesive. The skin is very tender, and when the scales are removed, the surface appears covered with a whitish cheesy exudation. The skin exhales a disagreeable odor. The sensations of the patient are often in the highest degree tormenting; not from severe pain, but from excessive burning and itching. When the vesicles cease to be renewed, or are much diminished, and the liquid dries up, a tendency is often left to the production of scales, which at first are soft, yellowish, and thickish, become gradually drier, thinner, and whiter, until they assume the form of exfoliations, as in psoriasis, or the furfuraceous appearance of pityriasis. As the disease terminates they become fewer and fewer, till they are produced no longer.

Eczema is more apt to appear upon the hairy parts, though it may affect any portion of the skin, frequently occurring in the flexures of the joints. It may affect the hairy scalp, and spread to the neck, ears, or face. A large number of hairs may penetrate one scab, and raise it from the surface with their growth, or, in the earlier stages, the hair may become matted by the abundant adhesive exudation. Bleeding wounds from the nails, swelling of the glands, small abscesses, scabs, pustules, and Pediculi, may compli-

cate the affection, till the hair may even be permanently lost from some portion of the scalp. If the discharge ceases, and the affection becomes furfuraceous, it is indicative of recovery.

If it descend to the face, (*crusta-lacta*), it is apt to affect the conjunctiva of the eyes, producing an ophthalmia, or to pass into the nostrils and mouth, causing inflammation of these cavities, and a copious secretion. It may destroy the eye-brows and eye-lashes, or occasion tumefaction of the ears, both internal and external, with small abscesses and obstinate purulent discharges.

In men, it may attack the genitals, or around the thighs and arms, when the itching often becomes excessive.

In women, if it attack the inner surface of the labia, it might be mistaken for leucorrhœa, or even for gonorrhœa, from which, however, it would be distinguished by the excessive itching, and by the vesicular character of the eruption.

In the flexures of the joints, if the skin become thickened, with cracks and fissures, or a scaly condition of the surface, the disease is often very obstinate. On the forearms and hands it has been mistaken for itch.

The vesicles of Eczema are smaller and more accumulated than herpes, there is less redness around the patches, and a less exudation of serous fluid. Miliary eruption does not occur in patches like Eczema, and is attended with more febrile symptoms. Litchen is papular, whilst Eczema is always vesicular, which in the main also distinguishes it from Impetigo, also its thinner and finer scales. It more frequently affects women than men. Infants have it more frequently about the head and face ; middle-aged persons about the genitals, arms, and thighs ; old persons, on the lower extremities.

TREATMENT.—Cathartics, refrigerants, narcotics, and depletions, and all allopathic quackery should be discarded as absolutely injurious and dangerous ; instances being on record of insanity having resulted from such a cure, and reliance should be placed on homœopathic remedies *alone*, internally administered. The principal remedies are *Aconitum*, *Belladonna*, *Calcarea carb.*, *Cantharis*, *Dulcamara*, *Mercurius sol.*, *Phosphorus*, *Rhus tox.*, and *Sulphur* ; or *Arsenicum*, *Bryonia*, *Camphora*, *Carbo veg.*, *Clematis*, *Hepar*, *Petroleum*, and *Sepia*.

If there be much fever, *Aconite* is the remedy, and it is also

adapted to many of the conditions of the eruptions during the inflammatory period, especially for children and young people.

*Belladonna*, whenever there is a scarlet redness of the skin, dilation of the pupils, dry itching and burning, with stinging, fulness or bloatedness, or if the patches have a whitish border, with swelling and scurf, also if there be great sensibility to the touch, tendency to start, and if the eyes are affected, or if the flexures of the joints are sore and swollen.

*Calcarea carbonica*, for persons of scrofulous tendencies, and especially for children, will often be found useful, when other remedies fail, and when the disease is protracted by some vice in the constitution, or from causes not exactly discoverable. It is adapted to excessive itchings and burnings, with biting stingings; dry roughness of the skin, or disposition to ulcerate, to scabs, and to tetterous eruptions; especially if there is numbness, and torpidity of the surrounding parts, and for women of profuse catamenia.

*Cantharis* is a valuable remedy in Eczema, and especially if there be fever, with unhealthy condition of the urinary secretions; if the parts affected are very sensitive to the touch ; and if, beside the burning pains, there are acute drawings and stingings, and excessive sensibility. The pathogenesis of this remedy in difficult cases should always be carefully consulted.

*Dulcamara* for crusta lactea ; and if the eruption be attended with swelling of the glands, also after the use or abuse of mercury, in connection with or after *Hepar sulphuris*; if the eruption appear in the flexures of the joints, or in the female, within the labia, or on the pudendum, and if there is difficult urination with strictures, slimy mucous sediment, or whitish and turbid urine, or yellowish, or red ; for persons subject to affections of the mucous surfaces, or to scorbutic affections ; also if it appear after a cold or chill.

*Mercurius*, almost always adapted to scrofulous, syphilitic, or rachetic patients, of unhealthy nutrition, and easy to suffer from exposure to cold; especially after a tendency to suppuration is manifested, and if the disease has not yielded to, or been cured by, *Bryonia*, *Rhus*, *Cantharis*, *Dulcamara*, or other remedies ; the excessive itching being worse at night in bed, and after being scratched. It corrects the morbid dyscrasia, and is better adapted to the ulcerative, than to the vesicular stage of the disease.

*Phosphorus* for persons of debilitated tendencies, and of lym-

phatic, scrofulous, or rachetic conditions ; especially for children and elderly people ; where the system is weak or exhausted, and where there is a tendency to inflammatory agitations and congestions, with a highly susceptible state of the nervous system ; the disease commences in round spots, which spread, and coalesce, attended with cracks, and with stinging, tearing or burning pains.

*Rhus* is useful in almost all the vesicular diseases, in the early stages, attended with itchings and burnings, and in the after stages, even where gangrenous ulcers are the result, and the attendant fever is very violent, and if there are crawlings, and shootings, stingings and smartings, and if worse at night in bed.

*Sulphur* may be given after *Rhus*, for symptoms similar to *Mercurius* and *Phosphorus*, and before or after either of those remedies, if necessary. It is indicated by the crawling, itching and burning, and especially if the eruption have a greenish yellow appearance, and discharge a serous lymph.

For further indications consult the pathogenesis of the medicines.

If Eczema be attended with fever, or result from exposures to cold and damp weather, *Dulcamara*, *Petroleum*, or *Phosphorus*, should be consulted ; also *Aconite*, *Belladonna*, and *Cantharides*.

If caused by exposures to the heat of the sun, or of fire, *Arnica*, *Arsenicum*, *Causticum*, *Belladonna*, *Bryonia*, or *Rhus toxicodendron*, also *Aconite*.

Eczema rubrum, may demand *Arsenicum*, *Calcarea carbonica*, *Bryonia*, *Belladonna*, *Cantharides*, *Phosphorus*, and *Rhus*, *Petrolcum*, or *Sulphur*.

Pustulous Eczema, or Eczema impetiginoides, pustules and vesicles appearing at the same time, will be met with *Carbo vegetabilis*, *Conium*, *Rhus*, *Tartar emetic*, or *Zincum*, unless some of the above mentioned remedies shall appear to be indicated, also *Bryonia*, and *Kali bichromaticum*.

Mercurial Eczema will usually be met with *Bryonia*, *Belladonna*, *China*, *Dulcamara*, *Hepar sulphuris*, *Sulphur*, or *Kali bichromaticum*, and syphilitic Eczema by *Mercurius*, or by the remedies for mercurial Eczema.

Chronic Eczema, *Arsenicum*, *Clematis*, *Conium*, *Calcarea carbonica*, *Petroleum*, *Phosphorus*, *China*, *Sulphur*, also all the remedies for mercurial and syphilitic Eczema may be adapted.

Of old people, the remedies for chronic Eczema, also *Aurum*,

*Baryta carbonica, Staphysagria*, and if the eruption have a yellow appearance. If it be red, *Arsenicum, Aurum, Belladonna, Dulcamara, Mercurius*.

SCABIES, (*Itch, Psora*),

Is a vesicular, contagious eruption, acuminate, distinct, and always attended with itching. It sometimes takes the form of pustules, but generally that of vesicles. No part of the body is exempt from this eruption, though the face is rarely affected. It frequently attacks the flexures of the joints, &c., and is sometimes confined to one spot. The space between the fingers, the hand, or the wrist, from their exposed situation, are most frequently affected, also the forearm, axilla, groin, &c.

The first sign of the disease, is an itching sensation, proceeding from a minute reddish eruption, with a transparent viscid liquid at the summit, and if torn by the nails, the effused liquid concretes into scabs; but if pustular, the scabs may coalesce and form excoriated surfaces, from which pus may exude. The itching is excessive, especially at night in bed, or after the use of stimulating drinks, &c. In persons whose skins are delicate, and full of blood, its progress is rapid; whilst in the feeble and cachectic it may be slower and more persistent. It is frequently checked on the supervention of an acute internal disease. The itch, if not cured, will continue for a lifetime, and may be communicated from the mother to the offspring; but has no fatal tendencies. Contagion is the only cause of scabies, and that by contact, either directly or indirectly. It is more common with children than adults; and is said to proceed from a minute insect, (*acarus scabiei*), or *sarcopetes hominis* burrowing in the skin, in or near the vesicle.

Scabies is distinguished from prurigo and lichen, by its vesicles, which in Scabies are almost universal, but in prurigo and lichen there is usually a small solid pimple without vesicles. Scabies prefers the inner, prurigo and lichen the outer portion of the limbs. The former is distinct, the latter often in patches, and in Scabies the itching is not attended with the burning tingling which distinguish prurigo and lichen, and these last are never contagious.

In Eczema the vesicles are painful, occur in patches, are not acuminate, and never of contagious origin; exactly the oposite is

true of Scabies, except that in the progress of the disease the pimples sometime coalesce.

TREATMENT.—*Mercurius* and *Sulphur* appear to be most specific remedies for this disease; next to these, *Carbo vegetabilis*, *Causticum*, and *Sepia*; or *Hepar*, *Lachesis*, *Lycopodium*; or *Clematis*, *Dulcamara*, *Graphites*, *Ranunculus*, and *Rhus toxicodendron*.

Give *Mercurius vivus*, two days; then *Sulphur*, two days; and continue to alternate these remedies until improvement follows. If the skin have a greasy appearance, and there are blisters, follow these remedies with *Causticum*, two days, night and morning. If the blisters turn yellow, or blueish, give *Lachesis*. If the eruption become dry, and small, give *Carbo vegetabilis*. If suppressed by external applications, give *Sulphur* and *Arsenicum*; also *China* or *Causticum*.

FOR DRY SCABIES—Give *Mercurius*, *Sepia*, *Silicea*; or *Calcarea*, *Causticum*, *Ledum*, *Lycopodium*, *Sulphur*, *Veratrum*, *Zincum*.

FOR MOIST.—*Carbo vegetabilis*, *Clematis*, *Graphites*, *Sepia*, *Staphysagria*.

FOR PUSTULOUS.—*Causticum*, *Clematis*, *Kreosotum*, *Lycopodium*, *Rhus toxicodendron*, *Ranunculus*, *Sepia*, *Sulphur*, *Tartar emetic*; with ulcers, *Clematis*, *Rhus*, *Hepar*.

FOR VESICULAR.—*Carbo vegetabilis*, *Causticum*, *Lachesis*, *Mercurius*, *Natrum*, *Rhus toxicodendron*, *Sepia*, *Sulphur*.

FOR GLOSSY or GREASY, FAT.—*Causticum*, *Kreosotum*, *Mercurius*, *Sepia*.

FOR BLEEDING.—*Calcarea*, *Dulcamara*, *Mercurius*, *Sulphur*.

FOR BAKERS' ITCH.—*Lycopodium*, and *Sulphur*; or *Calcarea*, *Dulcamara*, *Rhus*.

FOR PEDLARS'—*Cicuta*, *Lycopodium*, *Sulphur*; or *Dulcamara*, *Graphites*, *Muriaticum aceticum*, *Rhus*.

After the abuse of *Sulphur*, *Mercurius*, or *Causticum*; or *Calcarea*, *Dulcamara*, *Nitric acid*, *Pulsatilla*.

EXTERNAL APPLICATIONS.—The itching may at times be relieved after having given the medicines a few days, by washing the parts in water, either quite warm, or very cold, especially on those parts of the body not frequently washed. Soap and water will also at times give some alleviation. Oil, lard, and especially fish oil, cod

liver oil, &c., rubbed over the surface, and, after some hours, well washed off with strong soap and water, may sometimes remove the sароpti, upon which the propagation of the disease is supposed to be dependant. Wheat flour, or starch, or bran, may be applied to the surface, and will at times give relief. Any of the above expedients may be tried, whilst taking homœopathic medicines, and if they do not hasten, they will not retard the cure. Much more objectionable would it be, if any considerable portion of the body were affected, to apply strong alcohol, brandy, camphorated spirits, or any drugs, or ointments, which, although they might afford more rapid alleviation, would involve a greater sacrifice of the vital forces, and might prove destructive of life and health.

**ALLOPATHIC TREATMENT.**—Authors of the old school generally recommend the process of basting the whole body with sulphur ointment, as the truest and best specific. Next to this, mercurial ointments, and even corrosive sublimate; ointments of potassa, and washes of the same ingredients, and of diluted sulphuric acid, have been recommended. M. Bourquignon recommends a dilution of the alcoholic extract of staphysagria, or an ointment made of the powder of this plant in lard, which, says the Edinburgh Monthly Journal of Medical Science, will cure the disease in four days; and Biett recommends white elebore ointment, which, he says, will cure on an average in two weeks. But, say these authors, during the use of these remedies, vesicular and pustular eruptions may occur, and cause much inflammation, so that blood-letting, and cathartics, may be necessary, and laying aside these irritating applications, emollient baths, &c., must be used instead. M. Bazin, a French allopath, informs us, that anointing with lard, or oil, without medical admixtures, will cure the disease in four or five days; and in many German hospitals, soft soap alone has been used (*says Dunglison*) with great success. The disease is generally regarded by allopathic writers as altogether local, and the administration of internal remedies is seldom or never advised.

#### MILITARY ERUPTION, *Sudamina*.

This might seem more properly to have been classed among the febrile diseases, but as it has often been regarded as a disease of the skin, it will receive a brief attention in this place.

It consists of vesicles, of about the size of a millet seed, thickly

scattered over the body; usually an attendant upon some febrile disease. These vesicles are at first scarcely visible, only imparting a feeling of roughness to the fingers, but may be seen by viewing the surface obliquely, almost as transparent as water, looking like microscopic drops of sweat upon the skin. Though usually distinct, they may be so thick in some spots as to appear like clusters, or they may coalesce into bullæ of considerable size. They are usually most abundant on the neck and trunk. If they appear on a red base of a conical shape, and attended with itching, they may become opaque, and even pustular, or the form may be semi-globular, and there may be no redness or itching.

Occurring as they do in the course of febrile diseases, it appears to be as yet, entirely unknown, to what cause they are to be attributed, or by what particular forms of disease they are incited. It has been thought that copious and continued sweating in febrile diseases, favored their production. But in this case, though we should always look for them, they will by no means invariably be found. They are common in the course of typhoid and typhus fevers, as precursors to the eruption of small-pox, scarlatina, &c., and at times in consumptions, and in rheumatic and other fevers. They have also been known to appear upon persons in health. A sudden retrocession is considered an unfavorable omen.

**REMEDIES.**—The appearance of sudamina during the progress of any disease, would generally be an indication for *Bryonia*. If this did not seem adapted to the other conditions, *Aconite*, *Ipecacuanha*, *Mercurius*, or *Rhus tox.*, might be consulted; or *Antimony*, *Arsenicum*, *Belladonna*, *Chamomilla*, *Lachesis*, *Pulsatilla*, *Sulphur*. For a retrocession of the eruption, give *Sulphur*, *Bryonia*, *Belladonna*, or *Ipecacuanha*, *Arsenicum*, *Rhus*.

**CHRONIC MALARIA.**—*Ammonia carbonica*, *Clematis*, *Mezereum*, *Staphysagria*.

**WITH EXCORIATIONS.**—*Sulphur*.

Appearing in the cold air, *Sarsaparilla*.

Alternately with **ASTHMA**, &c., *Caladium seguinum*.

**WHITE MALARIA.**—*Arsenicum*, *Valerian*.

For the pustular variety, give *Clematis*, *Mercurius*, *Sulphur*, *Tartar emetic*.

### PEMPHIGUS

Is an eruption of bullæ, or small blisters, containing a yellowish transparent fluid, and terminating in scabs.

In its most simple form, bullæ from the size of a pea to that of a chestnut, appear upon the face, neck, or limbs, most frequently of children during dentition, which break and heal in three or four days.

In severer cases, it is attended with fever and inflammation for two or three days before the appearance of the eruption, which appears at first in circular spots, upon which a blister forms, sometimes as large as a hen's egg. These blisters are transparent and yellowish, and break in a few days, to be followed by yellowish-brown scabs, which leave the surface of a dusky red. Successive crods of the eruption may prolong the disease to three weeks. These bullæ may appear on one part, or extend over the whole surface of the body; and may be accompanied by fever and delirium.

### PEMPHIGUS SOLITARIS.

There may be only one large blister rapidly forming and breaking within forty-eight hours, discharging several ounces of liquid, and leaving an excoriated surface, to be followed, perhaps, by others successively, for eight or ten days.

CHRONIC PEMPHIGUS is distinguished from the acute only by its longer continued succession of bullæ, which may be continued for months, or even for years. The bullæ are sometimes seen on different parts of the body, in all the different stages, at the same time. They may be followed by painful excoriations, and attended with a general deprivation of health, not unfrequently ending in dropsy.

REMEDIES.—For the acute forms of Pemphigus, *Belladonna* and *Rhus* are the principal remedies. Next to these, *Cantharis*, *Dulcamara*, *Lachesis*, *Ranunculus*, *Tartar emet.*, and *Sulphur*.

For the chronic forms, *Arsenicum*, *Cicuta*, *Clematis*, *Graphites*, *Hepar sulphuris*, *Lachesis*, *Mercurius*, *Phosphorus*, *Rhus*, *Staphysagria*, *Sulphur*.

The following indications may be useful.

If the complaint be complicated, with urinary affections, *Can-*

*tharis, Clematis, Rhus and Sulphur, may be consulted, or Arsenicum, Graphites, Hepar, Mercurius, Staphysagria.*

If it be attended with indigestion, give *Sulphur* or *Bryonia*, *Nux vomica*, *Phosphorus*, or *Carbo veg.* And in obstinate cases, *Calcarea*.

If there are circular red spots, with biting stings, give *Bryonia*; also for cough, and soreness in the chest and limbs.

*Dulcamara*, when corroding ulcers are formed, and if there is burning pain, restlessness and emaciation.

*Belladonna*, if there is headache, vertigo, and burning smartings in the vesicles, which are full and shining.

*Carbo veg.* when the lymph in the vesicles inclines to a red or brownish color; the vesicles shrivel, become flaccid, break, and discharge a bloody matter.

*Causticum.* Vesicles like small blisters, general itching, especially of the hands and face.

*Sulphur*, for the roughness of the skin, weakness of the eyes, or hoarseness, which may remain after the disease; also, for many of the preceding conditions, will prove useful.

Sometimes the throat and bronchia become affected, pustules appear upon the mucous surface, attended with cough, and purulent expectoration. In this case, give *Bryonia*, *Belladonna*, *Hepar*, *Mercurius*, *Phosphorus*, or *Sulphur*.

#### RUPIA

Resembles *Pemphigus*, but the fluid in the vesicles is generally more opaque and sanious, the scabs thicker, often conical and fluted, and surrounded by a vesicated border, leaving behind ulcers, often deep, foul, and difficult to heal. In the mildest form, *Rupia simplex*, the fluid may be thin and transparent at first, but soon becomes opaque and purulent, and dries into brownish, rugged scabs, thicker at the centre than on the edges. These are easily detached, and leave an ulcerated surface, from which new scabs may several times arise.

In the severer forms, *Rupia prominens*, the surface is at first inflamed, bullæ form with greater or less rapidity, containing an opaque, or a blackish liquid, and scabs generally form very rapidly. The scabs receive additions from beneath, and at their borders, which gives to each scab a conical form, and a laminated appear-

ance, like a species of small oyster shells. These scabs may adhere for some time, or may be thrown off and again renewed, or unhealthy deep circular ulcers may remain. When these finally heal, they leave purple spots, which continue a long time.

In *Rupia escharotica*, the bullæ form upon a livid surface, at first small, but gradually enlarging, containing an opaque blackish liquid, and ending in ulcers, which spread and deepen, and are covered with a fœtid excoriating sanies, or pus. They appear successively, are attended with pain and fever, and may heal after a very long period, or end in death, even in two weeks. They sometimes form scars, and leave deep pits in the skin after recovery.

*Rupia* is most apt to occur on the lower extremities, and about the loins, and in aged or debilitated persons, who are badly fed, or are intemperate, or in young children of bad health, or of uncleanly and depraved habits and appetites.

**TREATMENT.**—The constitutional condition in this, as in most diseases of the skin, demands the first attention. The diet should be simple, mild, and free from spices, and all exciting substances, and the healthy portions of the skin should be kept perfectly clean by frequent ablutions. The treatment for *Pemphigus* and *Ecthema* may also be consulted. Allopaths treat with tonics, mineral acids, malt liquors, and wine; mercury and sarsaparilla; also iodide of potassium. (See Wood's Practice.)

**Homœopathically.**—*Arsenicum*, *Mercurius*, *Petroleum*, and *Sulphur*, are adapted; also *Calcarea*, *Chamomilla*, *Clematis*, *Hepar*, *Nitric acid*, *Rhus*, and *Sepia*: or *Borax*, *Kali bichro-maticum*, or *Hydrydicum*, *Silicea*, *Staphysagria*, and *Tartar emetic*.

If from a syphilitic origin, *Mercurius*, *Nitric acid*, *Kali hydriodicum*.

*Rupia Escharotica* of young infants, will mostly be met by *Chamomilla* and *Calcarea*; or by *Arsenicum*, *Borax*, and *Rhus*, or *Sulphur*; and *Sulphur* should usually be given to complete the cure. For further indications, consult *Pemphigus*.

## PUSTULAR AFFECTIONS

CONSIST of eruptions of pimples, or small tumors, containing pus. They are divided into Ecthyma, Impetigo, Acne, Mentagra, and Porrigo ; Variola, Varioloid, Vaccinia and Equinia, which by some are classed with pustular diseases, are generally treated as acute diseases, and will not be considered in this place.

Pustules may terminate by absorption, crusts and scabs may form with purulent matter underneath, or indurations may occur. In pustular diseases, the purulent matter exists in the early stages of the disease ; in vesicular, it is always an after product. The incrustations or scabs of vesicles are thin and flimsy ; those of pustules are thicker, and more solid.

### 1. ECTHYMA,

An eruption of round pustules, distinct, on a hard, inflamed base, followed by brownish scabs, and generally leaving reddish stains, or slight scars. They appear like small boils, generally break in two or three days, and may be very painful. Two pustules may join, and thus acquire greater size, and an irregular form ; or they may occasion sympathetic swelling of the neighboring glands.

Crop after crop of these pustules may arise, and protract the disease for months ; or they may become numerous, more diffused, larger, and more obstinate.

At times the whole reddened surface throws out a purulent fluid, or the scabs, when separated, may leave ulcers, which may be deep, unhealthy, painful, and difficult to heal.

In old people, or those of vitiated health, the pustules may have a livid base, and spread over almost the whole body. These break in eight or ten days, discharging a bloody serum, and leaving a deep excavation. A dark scab succeeds, surrounded by a hard swollen, and dark red border, which may adhere for months, unless forcibly removed, when it is usually followed by an obstinate and offensive ulcer.

Ecthyma is often preceded or attended with fever and constitutional disturbance, but is never contagious.

REMEDIES.—For the febrile symptoms, give *Aconite*, *Ipecacuanha*, *Tartar emet.*; or *Antimony crude*, *Bryonia*, *Rhus tox.*

For the eruptive stage, give *Causticum*, *Mercurius*, *Tartar emet.*; or *Arsenicum*, *Lachesis*, *Kreosote*; also *Belladonna* or *Pulsatilla* may be found useful.

For the sequillæ, give *Calcarea*, *Causticum*, and *Silicia*; or *Antimony crude*, *Baryta carb.*, *Sulphur*, *Thuya*, *Lycopodium*.

For old people, *Rhus*, *Arsenicum*, and *Lachesis*; or *Baryta carb.*, *Conium*, *Mezereum*.

If complicated with syphilis, give *Mercurius* and *Nitric acid*; or *Cannabis*, *Kali hydro.*, *Mercurius iodatus*, *Thuja*, or *Sarsaparilla*.

For the Eethyma of drunkards, give *Arsenicum*, *Lachesis*, *Nux vomica*, and *Rhus*.

If there be gastric disturbance, *Ipecacuanha*, *Nux vomica*, *Pulsatilla*, *Tartar emet.*; and *Arsenicum*, *Phosphorus*.

For urinary affections, *Cantharis*, *Cannabis*, *Mercurius*, *Rhus*, or *Phosphoric acid*.

And for persons of vitiated constitutions, often *Calcarea carb.*, *Phosphorus*, *Rhus*, *Arsenicum*.

#### IMPETIGO : From *Impeto*, to infest.

*Pustular Humid Tetter.* *Running Scall.* *Crusted Tetter*, &c.

Usually occurs in clusters of minute yellowish pustules, densely crowded upon a circumscribed red inflamed surface, slightly elevated, and extending a little beyond the pustules. It may be preceded or accompanied by fever, and general malaise; is most frequent on the face, but may occur on any portion of the body. There may be one or several patches, and the patches sometimes coalesce. These pustules frequently break and discharge by the third day, and leave a red, shining, excoriated surface, exuding an ichorous fluid from numerous minute pores. This exudation soon concretes into yellowish or greenish brittle translucent scabs, beneath which, matter continues to ooze. The physician, if called at this stage, will usually detect the disease by the appearance of the incrustations, and by a few pustules, which generally still show themselves at the borders of the diseased spot. The affection is attended with disagreeable sensations, such as itching, burning, smarting, &c. In

three or four weeks these sensations may diminish, and the discharge decrease; the scabs dry and fall off, leaving the skin red, thick, rough, and easily excoriated; so that slight irritations may renew the complaint. If it heal without irritation, the surface remains for some time red and shining, with a very delicate cuticle. The cure usually begins at the centre, and extends towards the circumference. The above is the acute form of the disease, or the Impetigo Rodens of Willan. In the chronic form, the pustules are constantly renewed, and go through the same changes as at first. They sometimes appear upon the original surface, and produce a deepened affection of the skin. Sometimes they occur upon the borders of the patch, extending in all directions, the centre remaining covered with a scabby incrustation, constituting a variety of ring-worm. At length it presents a dry, scabby surface, the origin of which is known only by a few characteristic pustules. It may cover one or both cheeks, may extend to the neck, appear upon the eye-lid, the upper or lower lip, or the ala of the nose. It may also appear on the limbs, but is usually larger on the upper than on the lower extremities.

If the disease, instead of appearing in regular patches, is scattered irregularly over the affected part; it is called Impetigo Sparsa. This form is most likely to become chronic; may spread over the whole of one or both limbs, and by the occurrence of successive crops of the eruption, it may form a firm yellowish incrustation, which has been compared to the bark of a tree, and forms the Impetigo Scabida of Willan. If these scabs are removed, the surface appears excoriated, but soon covers itself with a new crust, and the encasement thus formed, may even render motion difficult and painful. Sometimes the disease extends to the fingers and toes, and may cause a separation of the nails. Obstinate ulcers sometimes occur, which in old and feeble persons, are apt to be accompanied with oedematous effusion.

REMEDIES.—*Bryonia, Calcarea, Cicuta, Dulcamara, Graphites, Lachesis, Lycopodium, Mercurius, Rhus, and Sulphur; or Arsenicum, Cantharis, Conium, Phosphorus, Pulsatilla, Sepia, Silicea.*

Impetigo Scabia is frequently cured with *Lycopodium*; *Rhus*, and *Sulphur*, are also adapted; and for females, if there is leucorrhœa,

and deficient menstrual discharges, *Pulsatilla*, *Sepia*, *Silicea*, will be found useful.

For Impetigo Sparsa, *Cicuta*, *Lachesis*, and *Sulphur*, have been recommended.

For Impetigo Rodens, *Arsenicum*, *Calcarea*, *Cicuta*, *Rhus*, *Sepia*, and *Sulphur*.

For old and feeble persons, *Arsenicum*, *Lachesis*, *Rhus*; and if there be dropsy, *Pulsatilla*, *Cantharis*.

In the acute form of the disease, the parts should be kept clean as possible, and covered, so as to exclude the atmosphere; and all sources of irritation should be avoided. The external applications should only be made with a view to the comfort of the patient, and should be substituted for others whenever they are found not to subserve that end.

**IMPETIGO LARVALIS. *Porrido Larvalis. Crusta Lactea. Tinea Capitis. Scald-Head. Milk Crust,***

Is chiefly confined to infancy; may appear on any portion of the body, but most frequently occurs on the face or scalp, covering the surface with a scabby incrustation, as with a mask. It commences with small whitish pustules, attended with much itching. These soon break; a purulent fluid escapes, which concretes into soft yellowish, brownish, or greenish scabs. The pustules spread, the scabby surface extends, and the scabs thicken from the concretion of the matter beneath. If it commence on the forehead or cheek, it may cover the whole face, except the nostrils and eyelids; or it may cover only a limited portion of the chin, or it may completely encircle the lips. Sometimes the copious secretion prevents the formation of scabs, and sometimes there is but little fluid secreted, and the scabs are dry, brownish and adherent. If the disease be protracted, the skin may become fissured and excoriated, though scars are seldom left behind, unless from wounds by the fingers. If it appear on the scalp, the hair becomes agglutinated with the scabs, and if these are removed, the excoriated surface presents numerous exuding points, and occasional small abscesses.

At times the pustules are distinct, the scabs separate from the skin, are hard, irregular, and of a dark grey or brownish color constituting the Impetigo granulata of Cazenave and Schedel.

This affection is attended with itching and irritation, which frequently renders the child fretful and restless, and under Old School treatment has given rise to internal disorder, terminating in death. (*See Wood's Practice.*)

REMEDIES.—*Rhus tox.* and *Sulphur* are frequently sufficient to remove this disease; *Rhus* being better adapted to the earlier, and *Sulphur* to the later stages; or they may be given in alternate doses for one or two weeks.

*Arsenicum*, if the affection do not yield to the above remedies, or if the discharge be corrosive and offensive, with ulcerations, or with burnings, especially when touched; and if the glands of the neck are swollen, hard, and as if indurated.

*Calcarea*, *Carbonica*, in protracted cases; in vitiated constitutions with glandular enlargements; the head being covered with a thick crust; oozing tetterers behind the ears; soreness of the nose, dry coryza, and bleeding, with itching and inflammation of the eyes and eye-lids.

*Hepar sulphuris* has cured some cases after other remedies had been tried in vain, when there were ulcers, glandular enlargements, inflammation of the eyes, &c., in scrofulous children, and also when the pustules were distinct, often appearing like small boils, with purulent discharge.

*Lycopodium* is adapted to many cases where there is suppuration with foetid discharge, obstruction of the glands of the neck, oozing scabs behind the ears, small hard tumors, or abscesses, or pustules like furunculi, for scrofulous children, and especially for *Impetigo granulata*.

*Graphites* will frequently be found useful for symptoms similar to *Arsenicum*; if there is excessive itching, moist oozing eruptions, the hair comes off abundantly, and also if the eruption appear on the chin, or if it encircle the lips.

*Viola tricolor*.—I cured a case with this remedy, in a child of about four years of age. The entire scalp was invested with an incrustation about the thickness of a bonnet pasteboard, and which had for years resisted the unwearied attention of an Allopathic physician of reputed skill in this city. The hair was mostly gone. In two weeks, under the *Viola*, the child was improved; in six weeks it was well; a fine crop of hair succeeded, and the child has

since enjoyed perfect health. I made use of the sixth dilution, four doses daily. No external remedies were employed.

If the scab is very thick, or the eruption extend over the entire face, with general itchings, *Antimonium crudum* may be found useful, and if it be distinct, *Impetigo granulata*, *Tartar emetic*.

If it be dry and furfuraceous, *Arsenicum*, *Baryta*, *Calcarea*. *Hepar*, *Rhus*, *Silicea*, *Sulphur*.

If it be moist, *Dulcamara*, *Hepar*, *Graphites*, *Lycopodium*, *Rhus*, *Staphysagria*, *Sepia*, *Silicea*, *Sulphur*.

If the pustules are small and acuminate, containing a straw-colored matter appearing like honey, it is generally followed by a brownish yellow scab, and the pustules have received the name *Achones*. But if the pustules are larger, flattish, the matter more viscid, and the base of the pustules often more irregular and inflamed, the scab is generally yellow, more transparent, often cellular, like a honey-comb, and the pustules are called favi.

This disease has been classed by some authors as an Impetigo, by others as Porrido, and has sometimes been variously classed by the same authors. The Homœopathic treatment in either case is essentially the same.

#### ACNE. *Varus*. *Stone-pock*, &c.

A chronic eruption of pustules, distinct, with hardened inflamed bases, probably seated in the sebaceous follicles, and frequently terminating in tubercles. It may occur upon the face or neck, extend down along the back, or breast, or shoulders. In some cases the pimples appear in small numbers, and successively; in other cases they almost cover the surface. At first about the size of a pin's head, they may gradually enlarge, become red, shining, and slightly painful to the touch. Suppuration takes place slowly; in a week or more, a small quantity of pus is formed, which dries into a minute scab, separates, and leaves a small red elevated spot, which ultimately disappears. The eruption may be renewed indefinitely. This is the *Acne simplex* of Willan.

In the severer form, *Acne indurata*, the pustules are more inflamed, larger, and suppuration takes place more slowly. At times several follicles appear to unite, forming a considerable sized tumor, which, after suppurating, leaves a hard tubercle of a violet red color, remaining a long time. The inflammation sometimes

extends to the tissues beneath the skin, which become hardened, and give irregularity to the surface. The pustules become so numerous as nearly to cover portions of the face; and between these may be seen pimples and minute scabs, with the reddish spots and whitish oblong scars left by former eruptions. Or there may be numerous black points at the orifice of the follicles, from which sebaceous matter may be pressed out, appearing like small worms with black heads; and at times, there may be a gush of pus through the same orifice. This is denominated *Acne punctata*. If this matter is so abundant as to produce crusts, it has been termed *Acne sebacea*.

All the above forms may appear at the same time, and the disease may continue for years, till the constitutional tendency is exhausted, and it may leave indelible marks upon the skin. The surface in the vicinity of the diseased follicles has usually a greasy appearance.

**REMEDIES.**—*Acne simplex* requires *Antimony*, *Belladonna*, *Calcarea*, *Carbo veg.*, *Graphites*, *Hepar*, *Lycopodium*, *Ledum*, *Mercurius*, *Rhus*, *Sepia*, *Silicea*, *Sulphur*.

*Acne punctata*.—*Arsenicum*, *Bryonia*, *Calcarea*, *Drosera*, *Graphites*, *Hepar*, *Natrum mur.*, *Nitric acid*, *Sepia*, *Silicea*, *Selenium*, *Sulphur*.

*Acne of Drunkards*.—*Arsenicum*, *Belladonna*, *Carbo veg.*, *Ledum*, *Nux vom.*, *Pulsatilla*, *Sulphur*.

Indurations may require *Belladonna*, *Carbo veg.*, *Ledum*, *Silicea*, *Sulphur* or *Calcarea*, *China*, *Clematis*, *Lycopodium*, *Magnesia*, *Muriatica*, *Phosphorus*, *Plumbum*.

In the treatment of Acne the constitutional condition should always be regarded. If the patient is suffering from the misuse of *Mercury*, give *Hepar*, *Nitric acid* or *Silicea*.

Acne from a syphilitic cause, requires, *Mercurius*, *Nitric acid*, *Sarsaparilla*, *Thuja*.

From undue sexual indulgence, *Phosphorus*, *Staphysagria*.

Acne comedones, maggot pimples, may be cured by *Natrum* or *Selenium*, or by *Drosera*, *Graphites*, *Nitric acid*, or *Sabina*.

#### ROSACEA. *Acne rosacea*. *Gutta rosea*,

Usually appears first on the end of the nose, though it may commence on other portions of the face. At first, usually after some

excess in eating or drinking, the skin assumes a deep red color. This may disappear and return several times before the redness becomes permanent. Yellowish pustules afterwards appear, which form a striking contrast with the purple redness at their base. The skin swells unequally, and the enlarged capillaries exhibit blueish streaks over the surface. It may be confined to the nose, or may spread to the cheeks, forehead, chin, and even the whole face, which becomes red all over, though very unequally, being deepest about the pustules, which often become tuberculous, though not disposed to suppuration, nor to resolution. The surface affected is unequal, rugose, and the aspect very repulsive.

It is often caused by excesses in eating or drinking, though it may be induced from other causes, as excessive confinement, disorders of digestion, and from Menoposia, or from other causes inducing plethora. When of long standing it is usually exceedingly obstinate.

REMEDIES.—*Arsenicum, Bryonia, Carbo ani. and veg., Kreosote. Lachesis, Ledum, Pulsatilla, Rhus, Ruta, Veratrum.*

For persons addicted to intemperance.—*Nux vom., Arsenicum, Lachesis, Ledum,* may be adopted.

If from Menoposia.—*Pulsatilla, Lachesis or Bryonia, Belladonna, Arsenicum, and Sulphur.* Also *Cocculus, Sanguinaria, Sepia.*

#### Sycosis. *Mentagra. Sycosis menti.*

From *sukken*, a fig, the rough interior of which, it is thought by some to resemble, especially affects the hair follicles of the face, and may occupy the chin, eyebrows, or any portion of the face covered by the beard or whiskers. It is occasionally seated on the scalp. The patient is, at first, now and then affected with an eruption, of which, perhaps, he thinks little. At length some portion of the face is attacked with heat, swelling and redness, followed by an eruption of pimples, which, in a few days, are converted into pustules of about the size of a millet seed. Each pustule is usually penetrated by a hair. They may be isolated, or in clusters, or may commence at a point, and extend over a considerable surface. These break in six or seven days, forming brownish scabs. In ten days, or more, the scabs separate, and these pustules have run

their course, but others succeeds, inflammation extends to the subcutaneous tissues, accompanied by partial swelling and induration; the part becomes red, painful and deformed; the pustules are intermingled with yellowish or greenish brown scabs, matting together the hair or beard, and with tubercles of various sizes, at times as large as a cherry, which suppurate very slowly. It may affect only a small spot, covering it with a dark colored prominent scab of a peculiar appearance. If the hair fall from any spot it grows again, and resumes its wonted appearance on the restoration of health. The duration of the disease is very uncertain. It sometimes yields very speedily, at others it continues for years. Some persons suffer only in the winter, being perfectly free from the disease during summer. It is thought by some to be contagious, and to be communicable by the razor in shaving. It is distinguished from eruptions of syphilitic origin, by the syphilitic pustules being without pain and heat, slower in their progress, flatter, and surrounded by a copper-colored border, and not confined to the hairy parts.

REMEDIES.—These should always be regulated in accordance with the general health and constitutional condition of the patient. If these conditions correspond, *Cicuta* and *Silicea* may be given with hope of effecting a cure. Next to these, perhaps, *Antimony*, *Arsenicum*, *Graphites*, *Hepar*, *Lycopodium*, and *Sulphur*.

Or *Argentum nitrici*, *Carbo ani.*, *Kreosote*, *Mercurius*, *Sarsaparilla*, *Sepia*, *Clematis*, *Conium*, *Dulcamara*, *Ledum*, *Oleander*, *Spigelia*, *Staphysagria*, *Thuja*, may be adapted.

## SCALY DISEASES.

If the matter from any eruption concrete forming a covering, and thus protecting the surface from the atmosphere, it is termed a scab; but if in consequence of any eruption, a lamina of the skin is elevated, and caused to peel off, the lamina thus elevated is called a scale. The scaly diseases then, are those in which lamina in the form of scales, are thrown off from the skin during the progress of the disease.

1. PSORIASIS : *Dry Scall; Scaly Tetter,*

Is characterized by slight elevations of the skin, surmounted by whitish scales, not depressed in the centre. Numerous small papulous elevations, often not larger than a millet-seed, break out, increase in size, and continuing quite distinct sometimes appear like isolated drops of liquid upon the surface. If the scales are removed, they present a bright red, and somewhat painful elevation of the cuticle, which soon covers itself again with scales. They are most frequent on the back and limbs, are attended with itching, which is aggravated by the warmth of the bed.

If the elevations coalesce, forming large irregular surfaces, covered with scales of various thickness, and at times exhibiting remains of the original papulous elevations, it is called *Psoriasis diffusa*. If freed from the scales, the surfaces are red, rough, and chapped; often very large; or at times without any elevation, merely covered with minute scales. They may become inflamed and swollen, the scales may thicken, and the skin crack, into painful bleeding fissures.

PSORIASIS INVETERATA results either from long continued neglect, or from the constitution, condition and habits of the patient. It is a disease of old age, of poverty, of depraved habits; and may be induced by hardships and privations. The inflamed and thickened skin is intersected in all directions with furrows, filled with a white powdery matter, and producing immense quantities of scales. Cracks, and fissures occur in the vicinity of the articulations, which are very sore, painful and tender, even confining the patient to his bed.

In PSORIASIS GYRATA, the eruption appears in narrow strips ; either straight, or contorted and vermicular ; or sometimes in rings.

PSORIASIS is frequently local, and receives its name from its position. If it occur on the face, PSORIASIS FACIALIS, the scales are often of a light, yellowish brown color, or of a tawny hue. In the vicinity of the eye it assumes the form of minute scales, and is attended with inflammation of the conjunctiva. Around the lips, it may form a circle half an inch in width, with furrows converging towards the mouth, giving it a puckered appearance. The scales are thick, frequently exfoliate ; are apt to crack and bleed, and are painful on movement. In the palm of the hand, distinct red elevated spots coalesce and exfoliate, or a single inflamed and painful patch, covered with a whitish scale, extends its circumference, till it occupies the whole palm, or even the back of the fingers ; the central portions exfoliate ; and the purple, stiff, and tender surface, with deep fissures, render every movement of the fingers painful. Another form of the disease, PSORIASIS DORSALIS or GROCERS' ITCH, on the back of the hand and fingers, causes large, hard, and dry scales, and painful fissures around the knuckles. If the nails are affected, they become distorted, lamelated, of a yellowish color, with a whitish powder about their roots, and at times scales. In the scrotum, it renders the skin rough, scaly, cracked, and inexpandable, and on the prepuce, sometimes occasions phymosis. The severer forms are sometimes attended with fever, which subsides on the appearance of the eruption ; or the mucous membranes, especially of the bowels, may take on a chronic inflammation. It is distinguished from Lichen by its want of pimples, and from syphilitic eruptions, by the copper-color which always attends the latter.

TREATMENT.—Even old school writers caution us against the use of external repellent applications. The application of tar ointment has produced pericarditis, and other fatal diseases have been induced by similar causes. Homœopathic remedies, on the contrary, are always safe, and are more efficacious. The most approved remedies are *Clematis*, *Dulcamara*, *Graphites*, *Ranunculus*, *Sepia*, *Sulphur* ; also, *Antimony*, *Arsenicum*, *Cicuta*, *Conium*, *Lachesis*, *Ledum*, *Lycopodium*, *Mercurius*, *Phosphorus*, *Rhus*, *Silicea* ; or *Bryonia*, *Causticum*, *Hepar*, *Muriatic acid*, *Nitric acid*, *Oleander*, *Petroleum*, *Phosphoric acid*.

PSORIASIS of young children generally requires *Arsenicum*, *Calcarea*, *Cicuta*, *Dulcamara*, *Lycopodium*, *Muriatic acid*, or *Sulphur*.

PSORIASIS INVETERATA, *Calcarea*, *Clematis*, *Mercurius*, *Petroleum*, *Rhus*, *Sepia*, *Sulphur*; or *Arsenicum*, *Aurum*, *Cantharis*, *Dulcamara*, *Graphites*, *Hepar*, *Phosphorus*, *Pulsatilla*, *Sarsaparilla*, *Silicea*.

LABIALIS, *Calcarea*, *Mercurius*, *Natrum*, *Muriatic acid*; or *Antimony*, *Graphites*, *Causticum*, *Mezereum*, *Phosphorus*, *Rhus* and *Silicea*.

PALMARIS, *Graphites*, *Hepar*, *Mercurius*, *Petroleum*, *Silicea*, *Sulphur*; or *Alumina*, *Muriatic acid*, *Sarsaparilla*, *Silicea*, *Zincum*.

FACIALIS may be cured by *Calcarea* and *Sulphur*; or by *Graphites*, *Lycopodium* and *Sepia*.

SCROTALIS, *Causticum*, *Rhus*, *Petroleum*, and *Thuya*.

DORSALIS, GROCERS' ITCH, requires *Sulphur* or *Lycopodium*; or *Calcarea*, *Dulcamara*, *Graphites*, *Rhus*.

The syphilitic eruption requires *Clematis*, *Mercurius*, *Nitric acid*, *Thuya*; or *Lycopodium*, *Sarsaparilla*, *Sulphur*.

#### LEPRA, or LEPROSY: *Lepra vulgaris*,

Commences with minute solid eminences of a reddish hue, at first smooth, but soon covered with very delicate scales. They are distinct, and at considerable distances. Each one is quickly surrounded by others, forming regular circular patches, covered with glistening, tough, yellowish or grayish, translucent scales, and having a red, slightly elevated margin. The patches appear somewhat depressed in the centre; the scales fall, are renewed, accumulate and overlay each other, sometimes forming prominent incrustations of a whitish color upon the border. When the scales are removed, the surface is red, smooth, and shining. These patches often enlarge and retain their red prominent margin, while the central portions assume a healthy state; a ring of greater or less width surrounding a portion of healthy skin. The patches vary in size, from an inch even to a foot or more in diameter. Neighboring patches often coalesce, forming larger and less regular patches, especially in the vicinity of the joints. The disease most frequently appears on the extremities, and on those parts where the bones are most thinly covered.

It may spread nearly over the whole body. In children, the patches seldom exceed a few lines in diameter, and the scales are whiter.

In rare instances, *Lepra nigricans*, the patches are of a dark livid color, and scales of the size of half a dollar are diffused over the surface of the body.

An eruption of circular patches, less than an inch in diameter, in which the scales accumulate one upon another, the topmost one being pushed upward by larger ones beneath, till they form a sort of cone, has been termed LEPRA PROMINENS.

Regular circles or sections of circles distinguish LEPRA from PSORIASIS, also Lepra exhibits a depression in the centre of each patch. It has not the scabs and pustules which are characteristic of Porrido, nor does it destroy the hair. When *syphilitic eruptions* are circular, the ring is formed of little tubercles, arranged side by side, and if there are scales, they are smaller, not continuous, and cover only a small portion of each minute elevation.

Its duration is indefinite; it may continue for years; is usually attended with itching, and sometimes with soreness and pain on motion, so as to confine the patient in bed. Under allopathic treatment it is often extremely obstinate.

REMEDIES.—*Arsenicum*, *Clematis*, *Phosphorus* and *Rhus*; or *Bryonia*, *Causticum*, *Graphites*, *Silicea*; or *Cantharides*, *Calcarea*, *Carbo animalis*, *Cuprum*, *Sepia*, *Sulphur*, *Zincum*; and sometimes perhaps, *Alumina*, *Mezereum*, *Muriatic acid*, *Natrum*, *Petroleum*, *Sulphuric acid*, *Staphysagria*.

For further treatment, see the article *Psoriasis*.

#### PITYRIASIS: *Herpes furfuracei. Furfura. Dandruff*

Consists of irregular patches of thin bran-like scales, which are renewed as fast as thrown off. It is sometimes confined to the head, occupying especially those parts covered with hair, but may occur on any portion of the body. It frequently commences without any perceptible inflammation or redness, the surface being merely covered with minute dry, whitish scales, easily detached by rubbing; or there may be a uniform incrustation, easily separated into minute bran-like particles; at times several scales may be detached from the same spot successively, beneath which a reddened speck of skin may be found to supply them.

On other parts of the body, usually small reddish spots at first appear, which enlarge into irregular patches; exfoliation succeeds generally in white furfuraceous scales, the skin appearing as if covered with bran. As these fall off, their place is supplied by others, the quantity increasing with the duration of the complaint, until it frequently becomes excessive; or instead of these bran-like scales, portions of the skin may be detached of considerable size, which are also renewed as fast as removed. The skin beneath the scales is usually quite red, and sometimes sore and painful, and the complaint is sometimes attended with swelling and redness of the parts beneath. This is the *Pityriasis rubra* of Willan.

Pityriasis of the scalp occurs perhaps most frequently in young infants, though it is quite common to adults and old people. It is usually a dry scaly scurf, which may be removed by the comb in large quantities. Sometimes the scales are large, and at other times there is with the scales an adhesive exudation, which agglutinates the scales with the hair, forming a covering for the head like a cap of asbestos. The skin beneath is vividly red in numerous points. The disease is at times confined to the eye brows, at times to the red surface of the lids, which throw off a constant succession of translucent scales.

In the palms of the hands and soles of the feet, it occurs in red spots, which spread, and constantly throw off thickened and yellowish laminae or scales. It is always attended with itching, tingling, or pricking; and scratching generally increases the irritation, till it sometimes produces a serous exudation.

REMEDIES.—*Arsenicum, Bryonia, Calcarea, Phosphorus, Rhus, and Sulphur; Alumina, Graphites, Lycopodium, Sepia; or Conium, Hepar, Ledum, Staphysagria.*

For DANDRUFF, *Arsenicum, Mecereum, Oleander*; or *Bryonia, Calcarea, Graphites, Rhus and Sulphur.*

PITYRIASIS of the scalp of young children is often cured by *Rhus* and *Sulphur*, or by *Bryonia, Arsenicum, Calcarea, Lycopodium, Sulphuric acid.*

Local applications if used at all, should be used with great caution. Proper care for cleansing the head, is of course important. Allopaths recommend spirituous and alkaline lotions, ointments of alum, acetate of lead, sulphate of zinc, ammoniated mercury, tar

ointment, and calimine ; also chloride of lime. (See Wood's Practice.) No true homœopath would tolerate such crude and barbarous applications. After giving the homœopathic remedies, it may be allowable to anoint the surface with pure lard, fresh butter or cream, and after a few hours, to wash it off with some mild soap and water, cleansing it as perfectly as possible, with pure water after the application of the soap. It may sometimes be allowable also, after using a remedy for some time, to apply externally, a weak dilution of the same remedy. No other local medicinal applications are ever to be allowed. In children always, and in adults generally, the disease will be found to yield promptly to the above simple treatment. Whilst powerful local applications producing a repercussion of the disease upon important internal organs, may endanger life and health. (See also, Wood's Practice.)

PITYRIASIS VERSICULAR : *Chloasma. Macula hepatica. Hepatic spots*

First appears in small grayish, or dull reddish spots, which soon assume a yellowish or brownish yellow color, usually seated on the neck, breast, or back, but may occur on any portion of the skin. These patches enlarge, coalesce, and at times cover so much of the surface, that they might seem to be the natural color, and the unchanged portions to be discolored by disease. They are irregular, without elevation of the surface, and occasion little inconvenience, except a slight itching, and a mealy desquamation, which is much less observable than in *Pityriasis* proper. It is supposed by some to originate in a microscopic fungi, which are to be found among the scales ; and Mr. Startin of London argues that it is contagious. It is a very common affection, frequently occurring in women at the approach of the menstrual period, and disappearing when it is over ; sometimes in pregnant women, disappearing after a short period, or continuing until parturition. It is frequently attended with dyspeptic symptoms.

REMEDIES.—The principal remedies are *Antimony, Lauroceraus-sus, Lycopodium, Mercurius, Nitric acid, Sepia, and Sulphur* ; or *Arnica, Conium, Carbo veg., Dulcamara, Hyoscyamus, Lachesis, Natrum, Nux vomica, Phosphorus*.

If attended with itching, also *Ledum, Sulphuric acid.*

The patches of PITYRIASIS in some very rare instances, assume a dark or blackish color, PITYRIASIS NIGRA, or MELASMA.

REMEDIES.—*Arsenicum, Conium, Lachesis, Rhus, Secale.*

In cases of a repercussion of the disease to the mucous surface of the intestinal canal, or to the stomach, the same remedies may be found useful, or if not, the nature of the symptoms will generally suggest the appropriate remedy.

### ICHTHYOSIS. *Fish-Skin Disease.*

In this disease the skin becomes rough, thickened, hardened, almost horny; breaks into small irregular pieces like scales, which are generally bounded by the natural furrows of the skin; not easily exfoliating; if removed soon replaced by others of a similar character; and unattended with inflammation. It may cover almost the whole body, or be confined to a few particular portions. It is usually congenital, though sometimes acquired. In the congenital cases, the skin at birth is thick, harsh, and of a dirty color, but retains its integrity for a few months, when it assumes the condition nearly as above described.

The disease admits of some variety. In the milder forms, the skin may be merely dry, with small furfuraceous scales. When of a severer character, it breaks into scales, often of the shape of the natural cuticular lozenges, and at times embracing several of them in one scale. These are dry and hard, or shining and pearly, elevated like warts, and often surrounded by a blackish circle. On their removal the true skin exhibits no sign of inflammation, and except it be some of the larger scales, they may be detached without pain. The furrows of the corium may be deeper than in health, and the follicles more developed.

In another variety, minute portions of the skin are separately *hypertrophied*, projecting considerably above their base, and usually of a dark color.

The surfaces which perspire easily, and those in which the skin is most delicate, the palms of the hands, the soles of the feet, the axilla, groin, inner surface of the limbs, and the face, especially the eye-lids, are much less affected by this disease than other parts of the skin; whilst the outer and upper portions, where the skin is

thicker, are usually affected more severely. The disease is entirely unattended with itching or pain, and there is no apparent constitutional derangement, except there be a suppression of the perspiration, and in this case an excessive secretion from the diseased surfaces at times appears to supply the deficiency. Horn-like excrescences are sometimes developed upon the skin, consisting of layers of hardened *epidermis*, erroneously called horns.

This is a *hypertrophy* of the skin, of the same nature as Ichthyosis, as is also the celebrated porcupine disease.

The cause of this disease is generally obscure, and the disease itself exceedingly obstinate, requiring long continued treatment, and when congenital, it is generally pronounced incurable by Allopathic writers; and Homœopathy has as yet had so little experience that it is perhaps seldom we can safely promise a cure.

REMEDIES, which promise most favorably, are *Antimony*, *Colocynth*, *Plumbum*, *Ranunculus*, *Zinc*, also *Hepar* and *Sulphur*.

## TUBERCULAR DISEASES.

1. ELEPHANTEASIS OF THE GREEKS. *Lepro Tuberculosa. Leontiasis. Satyriasis,*

Consists of an eruption of irregular tumors of variable size, from a pea to a walnut, soft, smooth, shining, at first of a dusky red or livid color, afterwards of a yellowish brown, or like bronze. These tumors are usually preceded by reddish-colored patches in white persons, but of a color darker than the natural skin in the blacks. The skin between each tumor is thickened and discolored, the tissue beneath the skin often swells, and the part affected becomes greatly deformed, whilst the tumors themselves are nervously susceptible to the least pressure. It may occur upon any part of the body, or even cover almost the whole surface, though the face is most frequently affected.

If fully occupied by the disease, the aspect is revolting and hideous. Here and there knotty and irregular prominences are separated by deep furrows; the skin is hypertrophied and rugose; the lips, ears, and alæ of the nose enormously thickened; the nostrils distended, and the brows overhanging; the eye-brows, eye-lashes and beard fall off, and the face is enlarged, uneven, oily, and of a dusky livid hue. It may extend to the mucous membrane, and tubercles form in the mouth, fauces, or larynx, or the eyes may become inflamed; sometimes only a portion of the face is affected, which often becomes enormously enlarged. On the lower extremities it exhibits the same characteristic and revolting aspect, with uneven prominences, furrows, and a livid or bronze hue.

The affected parts at length lose their susceptibility to impressions; the smell and taste may become impaired or quite lost; the sight or hearing may be impaired; or the voice may be hoarse or husky, or lost. The patient becomes careless, indifferent, dejected, and destitute of mental energy.

The organic functions are not usually so much impaired, but that the patient may retain a tolerable degree of health for many years. At length, however, gastro-intestinal irritation is generally developed, which increases in the advanced stages. Inflammation is also

developed in the tumors, which ulcerate, and exude an ichorous matter, and form black scabs, or open running sores. The morbid tendencies sometimes extend to the deeper tissues. The bones become softened and carious, the soft tissues slough, the nose perhaps falls in, or the small joints separate by mortification, and death at last closes the scene.

In the ANÆSTHETIC variety, in place of tumors, vesicles appear on the extremities, succeed each other as in pemphigus, and after breaking, leave sores which cover themselves with white scabs ; the limbs, at first excessively sensitive, gradually lose their sensibility, become stiff and inflexible, and may assume a purplish glazed appearance ; the soft parts swell, ulcerate, and the small bones of the hands and feet separate, and fall off, and death follows, sometimes, after fifteen or twenty years of suffering, whilst the tubercular variety seldom continues more than twelve years. These two forms are often intermingled. After death, signs of gastro-intestinal irritation, tuberculous disease of the lungs and mesentery, and a soft spongy state of the bones is discoverable. Tubercles are also found in the larynx, oesophagus, and other parts of the chest and abdomen. The mucous membrane of the stomach is softened, and thinner than in health ; that of the bowels is also softened, but thickened and ulcerated, and the whole mucous surface has the same bronze hue as the skin.

#### TREATMENT.

Little is known concerning the treatment of this truly formidable disease. Allopathy here acknowledges its incapacity, and Homœopathy has as yet had little experience to demonstrate its success.

THE REMEDIES most likely to prove useful, are perhaps *Arsenicum*, *Calcarea*, *Causticum*, *Dulcamara*, *Lachesis*, *Lycopodium*, *Mezereum*, *Phosphorus*, *Rhus*, *Silicea*, *Sulphur* ; and next to these, *Allumina*, *Carbo An.* or *Veg.*, *Petroleum*, *Sepia* ; or *Antimony*, *Baryta*, *Bryonia*, *Conium*, *Graphites*, *Magnesia*, *Pulsatilla*, *Tartar Em.* *Thuja*, *Zinc*.

#### 2. LUPUS. *Noli me tangere,*

Is a chronic disease, usually manifested by dull red, or livid indolent tubercles, with or without ulceration, and leaving indelible cicatrices. It usually attacks the face, but has been observed else-

where, especially in the vicinity of the anus, and of the vulva in women.

It usually commences with one or more circular or oval tubercles, of a dull red color, soft or hard, seated in the external integument, and somewhat translucent.

In the ulcerous variety, *Lupus excedens*, these tubercles spread from a central point, producing superficial ulceration, or sink deeply, causing destruction of the parts beneath. In the former case, a scab forms on the ulcerated surface of the tubercle, which, if removed, is soon again renewed; the additional tubercles which spring up, go through a similar process, the central portion cicatrizing, as the circumference extends. This may be several times repeated, upon the same surface. As it approaches a healthy state, the surface may be rough, as if covered with minute dull red tubercles, or it is covered with thin scales, and ends in an indelible white scar.

Or if the disease sink into the deeper portions, the ulceration deepens and spreads, and as each successive scab is thrown off, appears to have extended further, until not only the soft parts, but even the cartilages in the vicinity are ulcerated and destroyed.

The ulcer of *Lupus* has thick red edges, an irregular surface, covered with patches of white lymph, or studded with fungous granulations, and exudes a foetid, ichorous fungoid matter. It has no doubt been frequently mistaken for cancer; hence many of the wonderful empirical cures.

*Lupus non-excedens* is without ulceration, the tubercles are softer, slightly prominent, often in patches, and usually of a circular shape, the intervening skin and cellular tissues swell, or the whole face at length becomes swollen, with dull red points here and there, the summits of the imbedded tubercles. The lips are much enlarged, the eye-lids averted, the nostrils closed, and the countenance hideous.

An *Erythematous Lupus* has been described by Cazenave, not belonging to the tuberculous diseases, and described as follows:

In the simplest form, a circular patch of redness, about the size of a half dollar appears on the cheek, slightly swollen, but without itching or pain, except when pressed, gradually extending its circumference, till it subsides, leaving behind a superficial scar like a burn.

In the second form the redness usually appears, at first, on the end of the nose, subsides and reappears. When it becomes fixed, there is usually some swelling, and a smarting sensation on exposure

to sudden changes of temperature, or from some intemperate indulgence. At length the redness disappears, the skin exfoliates, and is left red, smooth and shining.

In the third form exfoliation is more rapid, one lamina after another separating without ulceration, till the skin is nearly or quite destroyed, when the morbid condition ceases, leaving a cicatrix behind.

In all the varieties of *Lupus*, the cicatrix is destitute of the natural sensibility of the skin. The sufferings of the patient are less than might be supposed, the sensibility of the skin being diminished from the first. It may continue for life, but is seldom fatal, though often extremely obstinate.

REMEDIES.—*Arsenicum*, *Cicuta*, *Rhus*, *Sepia*, *Staphysagria*, *Silicea*, *Sulphur*, or *Calcarea*, *Graphites*, *Lycopodium*, *Mercurius*, *Natrum mur.*; or *Clematis*, *Conium*, *Hepar*, *Nitric Acid*, and *Petroleum*.

For the superficial varieties especially, *Amber grisea*, *Arsenicum*, *Calcarea*, *Clematis*, *Graphites*, *Lycopodium*, *Mercurius*, *Phosphorus*, *Silicea*.

For dry *Lupus* with hypertrophy of the face, *Alumina*, *Arsenicum*, *Graphites*, *Magnesia carb.*, *Silicea*, *Staphysagria*.

For *Lupus Vorax*, *Lupus of the Nose*, &c., *Arsenicum*, *Graphites*, *Mercurius*, *Nitrum Mur.*, *Nitric Acid*, *Sepia*, *Silicea*, *Staphysagria*, *Sulphur*.

Allopathic authors recommend Cod Liver Oil, and the preparations of Iodine, the red Iodine of Mercury, &c., and as external applications, the *Mineral Acids*, *Chloride of Zinc*, *Chloride of Gold*, and the preparations of Arsenic. Some of these remedies might be found advantageous, if Homœopathically administered.

### 3. MOLUSCUM,

Consists of numerous tubercles, from the size of a pea to that of a pigeon's egg, spherical or flattened, at times pedunculate and pendulous, with little sensibility, and without tendency to ulceration or inflammation. They are either the natural hue of the skin, or brownish, and may continue indefinitely without affecting the health.

In a contagious variety, sometimes classed with *Acne*, the tubercles are small, hard, round, smooth, and transparent, and, when pressed, exude from their summits a little opaque milky fluid. This

form occurs most frequently on the face or neck of young children, and its contagious nature is not fully proved, though generally believed. It may ulcerate, and leave a scar not unlike the Vaccine disease.

REMEDIES.—*Antimony, Bryonia, Cicuta, Dulcamara, Lachesis, Phosphorus, Rhus, or Thuja* may be indicated; or *Arsenicum, Carbo. An., Graphites, Kali Carb., Pulsatilla, Sepia, Tartar Emetic.*

#### 4. YAWS, OR FRABOESIA,

A contagious disease, most prevalent in the Antilles and in Africa, in which the tubercles come to resemble raspberries, and consist apparently of fungi, which spring up from beneath an ulcerated surface. They do not produce healthy pus, but an ichorous fluid, which concretes into scabs. Their color is reddish or whitish, and the hair on the parts affected turns white. It most frequently occurs on the face, axilla, groin, and near the anus or pudenda; appears, like the eruptive fevers, to run a certain course, varying from six to nine months in children, and a year or more in adults, and it generally occurs but once in the same individual.

REMEDIES.—I have no knowledge of any Homœopathic experience in the treatment of this disease. *Arsenicum, Bryonia, Dulcamara, and Lachesis* might seem to be adapted; or *Calcarea, Conium, Kali Carb., Pulsatilla* and *Silicea*; also *Rhus* and *Thuja*.

#### 5. KELOID OR CANCROID,

Appears as if an excrescence, flat on the surface, of irregular outlines, with processes shooting out from the main body, having a fancied resemblance to the claws of a lobster or crawfish, or to a bird with expanded wings. It is usually of a deep rose color, which disappears for a moment under pressure, smooth and shining; hard and resistant to the touch; and marked with tension-like lines extending across the surface. At first very small, it frequently extends to two or three inches in diameter. There is usually heat, itching, and pricking, or lancinating and burning pain, attended with great sufferings; but sometimes a feeling of stiffness or tension is the only suffering experienced.

The disease is of very long continuance, and may be hereditary, obstinately resisting the effects of treatment.

REMEDIES.—*Causticum*, *Phosphorus*, *Rhus* and *Sulphur*; or *Arsenicum*, *Calcarea carb.* or *Phosphorus*, *Kreosotum*, *Manganese*, *Nitric acid*, *Silicea*, are among the indicated remedies; also, *Iodium*, *Mercurius jod.*, *Kali bich.* and *Sepia*

#### 6. MACULÆ, (*Discolorations*)

Are supposed to be produced by some change in the pigment cells, either in their character or in the nature of the deposit with which they are supplied. They may consist of spots of variable size, or may occupy large portions of the surface.

##### 1. LENTIGO, (*Freckles*)

Are yellowish, brownish yellow, or greenish yellow, irregular, circular spots, existing most abundantly on the face and those portions of the skin which are exposed to the light, and unattended with abnormal sensation. They may be congenital and continue through life, or disappear at puberty, or may be incited by exposure to light and disappear again. They are common in persons of light complexion and of sandy hair.

REMEDIES.—It is doubtful whether *congenital* LENTIGO can be cured by medicine. Benefit would however be likely to result from the continued administration of *Antimony*, *Bryonia*, *Calcarea*, *Lycopodium*, *Natrum*, *Pulsatilla* and *Sulphur*.

##### 2. EPHELIS

Has by some been thought to be synonymous with Lentigo, and by some with Pityriasis versicolor. Large brownish patches, however, sometimes appear on the skin of persons of fair and delicate complexion, especially if exposed to the rays of the sun during summer, which disappear on the approach of winter. These patches are larger than lentigo, and are unattended with the characteristic itching of Pityriasis.

Another form of *Ephelis* occupies a large portion of the surface, giving the skin a pied appearance.

The discoloration is without elevation, desquamation or abnormal sensation, and is apt to be permanent. It has been termed *melanopathia*.

REMEDIES.—These may be the same as prescribed for Lentigo ; or in some cases, *Allumina*, *Dulcamara*, *Graphites*, *Kali*, *Muriatic acid*, *Nitric acid*, *Sepia*, *Tartar em.* and *Veratrum* may be useful.

These discolorations may sometimes be removed for a brief period by the use of washes and cosmetics ; but will generally return again on the first exposure. Of these the least objectionable is milk and water, buttermilk, or milk slightly acidified. Alcohol is sometimes used ; also, diluted muriatic acid, &c., but these and all poisonous or stimulating applications had better be avoided.

### 3. NÆVI, (*Mothers' Marks, Pigmentary Nævus.*)

A congenital discoloration of the surface, occurring in spots, at times covered with hairs, but in other respects differing little from the healthy skin. They are permanent, and have been attributed to the influence of the imagination, or of impressions made on the mother during pregnancy.

REMEDIES.—*Calcarea*, *Carbo veg.*, *Phosphorus* and *Sulphur*.

### 4. ALBINISMUS, (*Leucopathia.*)

In the diseases just considered, there is an increase or abnormal condition of the pigmentary matter of the skin ; in albinismus there is a diminution or total absence of this matter. Persons extensively affected are called *albinoes*. They are found among all the different races, but from the striking contrast, the disease is most observed among the blacks. Not only the coloring matter of the skin and hair, but also of the choroid coat of the eye is deficient, which is thus rendered so sensitive to light that the individual can see better at night than by day. It may be congenital or incidental, occurring from various causes after birth.

REMEDIES.—Incidental albinismus has been cured by *Arsenicum* ; *Alumina*, *Natrum*, *Sepia*, *Silicea*, *Sulphur* have been found useful. *Calcarea*, *Carbo an.*, *Mercurius*, *Phosphorus*, *Nitric* or *Phosphoric acid* might prove beneficial. Homœopathy has as yet had little experience in the treatment of albinismus, and an opportunity is certainly open in this direction for philosophical investigation.

CRYPTOGAMI, or, *Diseases of Concealed Origin and Unclassified Diseases.*

1. PORRIGO OR FAVUS, (*Scald-Head, Tinea capitis, Tinea favosa,*)

Is characterized by scab-like, cup-shaped elevations, distinct or confluent, and contagious. If pustules are present they are merely accidental, having no connexion with the disease. It most frequently appears on the scalp, but may be transferred to other parts as the face, neck, &c. It first shows itself in the form of specks, of a sulphur-yellow color, just rising above the surface, and appearing as if set in the skin. They are irregularly scattered, at times closely crowded, and attended with itching. Under the microscope, each crust is seen to be depressed in the centre, or cup-shaped, which distinguishes this from all other eruptive diseases. As the crusts enlarge, this depression becomes manifest to the eye, and the crusts thicken until they are sometimes very prominent. Sometimes they coalesce and form a continuous incrustation. In this case each crust assumes a hexagonal shape, and the central depression still remaining, the surface appears somewhat like a honey comb. Hence the name *favosa*, or favus.

It may be accompanied with *Ecthyma* or *Impetigo*, or the whole scalp may be covered as with a closely fitting cap. These crusts may adhere for months or years, may become whiter and more brittle, and break into small powdery fragments. In this condition they may lose their characteristic shape, and become convex, but new incrustations develope their true character. In the worst cases, if the incrustation be removed by emollient applications, small excoriated or ulcerated depressions sometimes give the surface a reticulated appearance, and in very old cases may penetrate to the periosteum, or even to the bone, which may become carious. When long continued, the disease is thought to retard the development of the system, and to affect the intellectual faculties. The hair which falls off is sometimes never reproduced; it has usually for a long time an unnatural downy and colorless appearance.

*PORRIGO SCUTULATA, (Favus Confertus, or Ringworm of the Scalp)*

Differs little from the preceding, only that the scabs cluster into circular patches. These patches enlarge at their circumference, and may exhibit all the different stages—the incipient reddish circle, the yellowish specks, the scabby incrustations, the brittle and crumbling crusts, and the final white and hairless patch, at the same time. At times these patches coalesce, and lose their regular outlines, covering the whole scalp.

The disease is contagious, and has been communicated by inoculation. No age and neither sex is exempt, but it is most common in children from six to ten years of age. It is believed to originate in microscopic fungi. It may be distinguished by its flat surface, set in the skin, with slight redness at the base ; its cup-shaped scab ; the white powdery appearance of its latter stages ; the loss of hair ; and its contagious character.

**REMEDIES.**—*Arsenicum, Baryta carb., Hepar, Rhus, Staphysagria* ; or, *Calcarea, Dulcamara, Lycopodium, Sarsaparilla, Sulphur* ; also, *Bromine, Graphites, Mercurius, Phosphorus, Oleander, Petroleum, Viola tricolor*.

Old school physicians have generally been very unsuccessful in curing this truly troublesome and at times obstinate complaint ; and their most approved authors recommend the most cruel and dangerous external applications, with no reliance on internal remedies. Blisters, issues, and setons ; cod liver oil, iodine, iron, caustic, or nitrate of silver ; tar, pitch, potash, and soda ; lime, zinc, copper, mercury, alum, manganese, coccus, hellebore, cantharides, creosote, &c., &c., are favorite applications ; and they generally recommend to pull out all the hair with tweezers, or by means of an adhesive cup ; or to destroy it by depilatory applications. (*See Wood's Practice.*)

Homœopathy, on the contrary, relies upon the more certain though more unseen efficacy of her little pellets, and uses external applications only for the sake of cleanliness ; and her remedies always cure.

2. TRYCOSIS: *Ringworm of the Scalp.* *Trycosis furfuracea,*

Consists of one or more circular patches, covered with furfuraceous scales, and the remains of hairs rising a little above the skin, of unequal length, ragged at the ends as if eaten off by an insect, uniformly bent or twisted, giving them a torn-like aspect; and around the hair follicles small papillary elevations, sensible to the sight or touch. In old neglected cases the incrustations sometimes become thick and broken by white lines. They are variable in size, and may increase until they become confluent and nearly cover the scalp, usually leaving a narrow fringe uninjured around the head. It is extremely obstinate, and if not alleviated, may end in complete and incurable baldness.

Under the microscope each hair appears to be thickened, and to contain beneath its outer coat a layer of nucleated cells, and within these, longitudinal filaments, undulatory in their course, with nucleated cells here and there distributed between them.

*Trycosis decalvans*—Consists of patches of baldness, more or less circular, with little or no eruption on the surface. The affected portion is smooth, shining, remarkably white, and quite hairless, while all around the hair is perfect. The patches may enlarge, become confluent, and at length denude almost the whole scalp. As the disease subsides it is followed by a new crop of hair, which is soft and light-colored, and in persons advanced in life, is apt to be gray.

Small papulous elevations of the skin may at times appear at the openings of the hair follicles. The disease is thought to be of parasitic origin, and therefore contagious.

TREATMENT.—The external treatment should only have reference to cleanliness. Allopaths use tar ointment; nitrate of mercury; red precipitate; iodide of sulphur; sulphate of zinc; sulphate of copper, and corrosive sublimate, as external applications; and remove all the hair close to the head, by cutting or shaving. Such irritating poisons in such quantities, may be expected to exert an injurious effect upon the general health of the patient. They are also altogether unnecessary.

REMEDIES.—*Rhus* and *Sulphur*, will often be sufficient to cure this complaint in a few weeks. If these remedies do not cure, give *Arsenicum*, and afterwards again give *Rhus*. If the disease be

protracted, give *Lycopodium* or *Calcarea*, or *Graphites*, and follow these remedies again with *Rhus* and *Sulphur*, in a few weeks.

Every attention should be paid to cleanliness. The hair should be cut as short as possible, and the parts frequently washed; advantage may be derived from covering the surface with sweet cream, or lard, and after a few hours washing it thoroughly in mild soap and water, cleansing it very thoroughly in pure water afterwards. If this course be persevered in, a cure may always be expected.

### 3. ELEPHANTIASIS OF THE ARABIANS.

A chronic indurated swelling of the subcutaneous tissues, with more or less alteration of the skin. It usually occurs on the lower extremities, and the limb at times attains an enormous size. The disease is said to commence with acute inflammation of the lymphatic vessels; pain is experienced; and if the complaint occur in the leg, a hard knotty cord may be discovered along the course of the absorbents, from the ankle to the groin, where the glands are often much swollen. There may be at the same time more or less inflammation, and swelling, fever, headache, delirium, vomiting, &c. These attacks subside, and leave perhaps only a slight tumefaction, but may be again repeated, until they at length produce enormous tumefaction, and induration of the parts beneath. The swelling may be uniform, or in successive portions, separated from each other by deep furrows. The skin may be white, smooth and tense, or variously altered with prominent veins, varicose tumors, ulcers, fissures or fungous excrescences; or it may pour out a liquid exudation, which concretes into scabs; or may cover itself with scales as in Ichthyosis. The glands may suppurate, sloughs form, and discharges of foetid matters may occur. It may continue for years, and finally exhaust the patient, or may terminate favorably in a restoration to health.

If the scrotum is affected, it sometimes attains an enormous size. Dr. Horner of Rio Janeiro, reports two cases in which the tumor was four feet in circumference.

TREATMENT.—In the treatment of Elephantiasis, much attention should be paid to the general health of the patient, as well as to the appearance of the diseased parts; the kind of pain experienced; the nature of the exudations, and many other circumstances which may

guide in the selection of the appropriate remedies. Often where an entire cure cannot be effected, the sufferings may be greatly alleviated, and life indefinitely prolonged.

REMEDIES.—*Arnica, Arsenicum, Belladonna, Bryonia, Calcarea, Causticum, Cantharides, Colchicum, Conium, Crotalus, Dulcamara, Graphites, Iodium, Kali, Kreosote, Lachesis, Ledum, Lycopodium, Mezereum, Muriatic acid, Natrum, Nux vomica, Phosphorus, Pulsatilla, Rhododendron, Rhus, Sepia, Silicea, Sulphur, Sulphuric acid, Veratrum, and Zincum*, are homœopathically adapted remedies. Great benefit has sometimes appeared to result from the use of the *Hammamelis virginialis*, externally and internally, for considerable time. In cases with ulceration, *Arsenicum, Lachesis* and *Silicea*, will be found useful; for varicose tumors, *Arnica, Lachesis* and *Pulsatilla*; and for indurations, *Calcarea, Lycopodium, Phosphorus* and *Silicea*. For females of deficient menstruation, *Conium, Graphites, Lachesis, Phosphorus, Pulsatilla, Silicea*; and for those of profuse menses, *Calcarea, Belladonna, Nux vomica, &c.*

#### 4. PELAGRA

Is a disease common in some parts of Europe, commencing in the Spring, and always preceded by a disordered condition of the system, as uneasiness, weakness, depression and anemia. It is often fatal, and may continue for years. The eruption occurs mostly on those parts exposed to the sun; in patches, dark erythematous, or perhaps chocolate colored, without pain or itching, and with subsequent desquamation; or it may be of an erysipelatous character, with vesicles, blisters, and a burning pain, ending in exfoliation, followed by a smooth, shining, darkened spot. During the progress of the eruption, the appetite is wanting, or morbidly excessive; the bowels constipated, or with loose, unhealthy discharges; the lips and the mucous surface of the mouth pale or ulcerated. As the season advances, these symptoms remit, and at the beginning of Autumn scarcely any traces of the disease remain, again to make their appearance in the Spring; the general health being more impaired than before. The disease becomes more aggravated each year, until palsy, convulsions, mania, delirium, supervene, and the patient perhaps dies of prostration, or with fever of a typhoid char-

acter ; if some other affection, as dysentery or consumption, do not hasten the fatal termination. The remedies indicated are especially *Arsenicum*, *Lachesis* and *Rhus*; also *Bryonia*, *Calcarea*, *Conium*, *Lycopodium*, *Nux vomica*, *Phosphorus*, may be found useful ; also *Crotalus*, *China*, *Graphites* ; or *Coccus indicus*, *Cuprum*, *Hyoscyamus*, *Secale* and *Stramonium*.

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